Fill in this information to identify your case:		
United States Bankruptcy Court for the:		
EASTERN DISTRICT OF ARKANSAS		
Case number (if known)	Chapter you are filing under:	
	Chapter 7	
	☐ Chapter 11	
	☐ Chapter 12	
	☐ Chapter 13	☐ Check if this is an amended filing

Official Form 101

Voluntary Petition for Individuals Filing for Bankruptcy

12/17

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a *joint case*—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses *Debtor 1* and *Debtor 2* to distinguish between them. In joint cases, one of the spouses must report information as *Debtor 1* and the other as *Debtor 2*. The same person must be *Debtor 1* in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Pai	rt 1: Identify Y	ourself			
			About Debtor 1:		About Debtor 2 (Spouse Only in a Joint Case):
1.	Your full name	е			
	Write the name	e that is on	Terry		
	your government-issued picture identification (for example, your driver's license or passport). Bring your picture		First name	_	First name
		Don			
		Middle name		Middle name	
		Peery			
	identification to meeting with th		Last name and Suffix (Sr., Jr., II, III)		Last name and Suffix (Sr., Jr., II, III)
2.	All other name	es you have st 8 years			
	Include your m maiden names				
3.	Only the last 4 your Social So number or fee Individual Tax Identification (ITIN)	ecurity Ieral (payer	xxx-xx-6643		

Debtor 1 Terry Don Peery

Case number (if known)

		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
4.	Any business names and Employer Identification Numbers (EIN) you have used in the last 8 years Include trade names and doing business as names	■ I have not used any business name or EINs. Business name(s) EINs	☐ I have not used any business name or EINs. Business name(s) EINs
5.	Where you live	515 Cheshier Court	If Debtor 2 lives at a different address:
		Jacksonville, AR 72076 Number, Street, City, State & ZIP Code	Number, Street, City, State & ZIP Code
		Pulaski	
		County	County
		If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address.	If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address.
		Number, P.O. Box, Street, City, State & ZIP Code	Number, P.O. Box, Street, City, State & ZIP Code
6.	Why you are choosing this district to file for	Check one:	Check one:
	bankruptcy	Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.	Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.
		☐ I have another reason. Explain. (See 28 U.S.C. § 1408.)	☐ I have another reason. Explain. (See 28 U.S.C. § 1408.)

4:19-bk-16123 Doc#: 1 Filed: 11/15/19 Entered: 11/15/19 16:43:00 Page 3 of 65

Del	otor 1 Terry Don Peery				Case number (if known)		
Par	Tell the Court About	Your Bankruլ	ptcy Case				
7.	The chapter of the Bankruptcy Code you are choosing to file under	Check one. (For a brief description of each, see Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)). Also, go to the top of page 1 and check the appropriate box.					
	choosing to the under	Chapter	7				
		☐ Chapter	11				
		☐ Chapter	12				
		☐ Chapter	13				
8.	How you will pay the fee	about order.	how you may pay. T	ypically, if you are paying the f	check with the clerk's office in your lo ee yourself, you may pay with cash, o r behalf, your attorney may pay with a	ashier's check, or money	
					option, sign and attach the Application	on for Individuals to Pay	
			=	ents (Official Form 103A). waived (You may request this	option only if you are filing for Chapte	r 7. By law. a judge may.	
		but is that a	not required to, waiv pplies to your family	re your fee, and may do so only size and you are unable to pay	y if your income is less than 150% of to the fee in installments). If you choose	he official poverty line e this option, you must fill	
		out the	e Application to Hav	e the Chapter / Filing Fee War	ved (Official Form 103B) and file it wit	h your petition.	
9.	Have you filed for bankruptcy within the	■ No.					
	last 8 years?	☐ Yes.					
		Г	District	When	Case number		
		[District	When	Case number		
		Γ	District	When	Case number		
10.	Are any bankruptcy	■ No					
	cases pending or being filed by a spouse who is not filing this case with you, or by a business partner, or by an affiliate?	☐ Yes.					
		[Debtor		Relationship to you		
		Г	District	When	Case number, if known	own	
		Г	Debtor		Relationship to you		
		С	District	When	Case number, if kno	own	
11.	Do you rent your residence?	■ No.	Go to line 12.				
	i esiuelice :	☐ Yes.	Has your landlord o	btained an eviction judgment a	gainst you?		
			☐ No. Go to lir	ne 12.			
			Yes. Fill out this bankrup		ction Judgment Against You (Form 10	1A) and file it as part of	

4:19-bk-16123 Doc#: 1 Filed: 11/15/19 Entered: 11/15/19 16:43:00 Page 4 of 65

Det	Terry Don Peery			Case number (if known)
Par	t 3: Report About Any Bu	sinesses	ou Own as a Sole Proprietor	
12.	Are you a sole proprietor of any full- or part-time business?	■ No.	Go to Part 4.	
		☐ Yes.	Name and location of business	
	A sole proprietorship is a			
	business you operate as an individual, and is not a separate legal entity such as a corporation, partnership, or LLC.		Name of business, if any	
	If you have more than one sole proprietorship, use a		Number, Street, City, State & ZIP Code	
	separate sheet and attach it to this petition.		Check the appropriate box to describe your business:	
			Health Care Business (as defined in 11 U.S.C.	§ 101(27A))
			☐ Single Asset Real Estate (as defined in 11 U.S.	
			☐ Stockbroker (as defined in 11 U.S.C. § 101(53A))
			☐ Commodity Broker (as defined in 11 U.S.C. § 10	01(6))
			☐ None of the above	
13.	Are you filing under Chapter 11 of the Bankruptcy Code and are you a small business debtor?	deadline operation in 11 U.S	If you indicate that you are a small business debtor, you	are a small business debtor so that it can set appropriate must attach your most recent balance sheet, statement of any of these documents do not exist, follow the procedure
	For a definition of small	■ No.	ram not ming under onapter 11.	
	business debtor, see 11 U.S.C. § 101(51D).	□ No.	I am filing under Chapter 11, but I am NOT a small bus Code.	iness debtor according to the definition in the Bankruptcy
		☐ Yes.	I am filing under Chapter 11 and I am a small business	debtor according to the definition in the Bankruptcy Code.
Par	t 4: Report if You Own or	Have Any	Hazardous Property or Any Property That Needs Imme	diate Attention
14.	Do you own or have any	■ No.		
	property that poses or is alleged to pose a threat of imminent and identifiable hazard to	☐ Yes.	What is the hazard?	
	public health or safety?			
	Or do you own any property that needs immediate attention?		If immediate attention is needed, why is it needed?	
	For example, do you own perishable goods, or livestock that must be fed, or a building that needs urgent repairs?		Where is the property?	
	- ,		Number, Street, City, State & Zip	Code

Debtor 1 Terry Don Peery

Case number (if known)

Part 5:

Explain Your Efforts to Receive a Briefing About Credit Counseling

 Tell the court whether you have received a briefing about credit counseling.

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

About Debtor 1:

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about credit counseling because of:

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

☐ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver credit counseling with the court.

About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

□ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

□ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about credit
counseling because of:

Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court. 4:19-bk-16123 Doc#: 1 Filed: 11/15/19 Entered: 11/15/19 16:43:00 Page 6 of 65

Deb	Debtor 1 Terry Don Peery				Case nun	Case number (if known)			
Par	6: Answer The	ese Question	ns for Repo	orting Purposes					
16.	What kind of del	bts do 1			consumer debts? Consumer debts are consonal, family, or household purpose."	defined in 11 U.S.C. § 101(8) as "incurred by an			
				No. Go to line 16b.					
				Yes. Go to line 17.					
		1			ousiness debts? Business debts are deletement or through the operation of the				
				No. Go to line 16c.					
				Yes. Go to line 17.					
		1	16c. S	tate the type of debts you	owe that are not consumer debts or business.	iness debts			
17.	Are you filing un Chapter 7?	nder [□ No. I	am not filing under Chapte	er 7. Go to line 18.				
	Do you estimate after any exemp property is exclu	t uded and			Do you estimate that after any exempt p is will be available to distribute to unsecu				
	administrative expenses are paid that funds will			No					
	be available for distribution to u creditors?			l Yes					
18.	How many Creditors do		□ 1-49		1 ,000-5,000	1 25,001-50,000			
	you estimate that you owe?	at you	50-99		<u></u> 5001-10,000	<u> </u>			
			☐ 100-199 ☐ 200-999		□ 10,001-25,000	☐ More than100,000			
19.	estimate your assets to be worth?		□ \$0 - \$50, □ \$50,001		□ \$1,000,001 - \$10 million □ \$10,000,001 - \$50 million	□ \$500,000,001 - \$1 billion □ \$1,000,000,001 - \$10 billion			
				I - \$500,000 I - \$1 million	□ \$50,000,001 - \$100 million □ \$100,000,001 - \$500 million	☐ \$10,000,000,001 - \$50 billion ☐ More than \$50 billion			
20.		How much do you		000	■ \$1,000,001 - \$10 million	☐ \$500,000,001 - \$1 billion			
	estimate your lia to be?	-		- \$100,000	□ \$10,000,001 - \$50 million	\$1,000,000,001 - \$10 billion			
				I - \$500,000 I - \$1 million	☐ \$50,000,001 - \$100 million ☐ \$100,000,001 - \$500 million	☐ \$10,000,000,001 - \$50 billion ☐ More than \$50 billion			
Par	Sign Below	1							
For	you	1	have exam	ined this petition, and I de	eclare under penalty of perjury that the in	formation provided is true and correct.			
					7, I am aware that I may proceed, if eligi relief available under each chapter, and	ble, under Chapter 7, 11,12, or 13 of title 11, I choose to proceed under Chapter 7.			
					not pay or agree to pay someone who is he notice required by 11 U.S.C. § 342(b)				
		1	request rel	ief in accordance with the	chapter of title 11, United States Code,	specified in this petition.			
		b 1	oankruptcy 1519, and 3	case can result in fines up		ey or property by fraud in connection with a 20 years, or both. 18 U.S.C. §§ 152, 1341,			
		7	Ferry Don Signature of	Peery	Signature of De	btor 2			
		E	Executed or	November 15, 2019	Executed on				
				MM / DD / YYYY		MM / DD / YYYY			

4:19-bk-16123 Doc#: 1 Filed: 11/15/19 Entered: 11/15/19 16:43:00 Page 7 of 65

Debtor 1	Terry Don Peery	Case number (if known)	

For your attorney, if you are represented by one

If you are not represented by an attorney, you do not need to file this page. I, the attorney for the debtor(s) named in this petition, declare that I have informed the debtor(s) about eligibility to proceed under Chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each chapter for which the person is eligible. I also certify that I have delivered to the debtor(s) the notice required by 11 U.S.C. § 342(b) and, in a case in which § 707(b)(4)(D) applies, certify that I have no knowledge after an inquiry that the information in the schedules filed with the petition is incorrect.

/s/ Lonnie Grimes Signature of Attorney for Debtor	_ Date	November 15, 2019
Lonnie Grimes		WIWI / DD / TTTT
Printed name		
Knollmeyer Law Office P.A.		
2525 John Harden Drive Jacksonville, AR 72076-1867		
Number, Street, City, State & ZIP Code		
Contact phone (501) 985-1760	Email address	pennyhawkins2016@gmail.com
AR88-033 AR Bar number & State		

	4:19	9-bk-16123 Do	c#: 1 Filed: 11/15	5/19 Entered: 11/15/19 16:43:00	Page 8	3 of 65
Fill	in this inform	nation to identify your	case:			
Del	btor 1	Terry Don Peery First Name	Middle Name	Last Name		
	btor 2 buse if, filing)	First Name	Middle Name	Last Name		
Uni	ited States Bar	nkruptcy Court for the:	EASTERN DISTRICT O	F ARKANSAS		
	se number				_	ck if this is an ended filing
Su Be a	Immary Of as complete a ormation. Fill of r original form	nd accurate as possib out all of your schedulens, you must fill out a	le. If two married people es first; then complete the	d Certain Statistical Information are filing together, both are equally responsible information on this form. If you are filing among the box at the top of this page.	e for suppl	
Par	rt 1: Summa	arize Your Assets				
						assets of what you own
1.	Schedule A/ 1a. Copy line	/B: Property (Official Fo	orm 106A/B) rom Schedule A/B		\$	200,000.00
	1b. Copy line	e 62, Total personal pro	perty, from Schedule A/B		\$	34,106.00
	1c. Copy line	e 63, Total of all property	y on Schedule A/B		\$	234,106.00
Par	rt 2: Summa	arize Your Liabilities				
						liabilities unt you owe
2.			aims Secured by Property nn A, Amount of claim, at	(Official Form 106D) the bottom of the last page of Part 1 of <i>Schedule L</i>	D \$	646,308.00
3.	Schedule E/I	F: Creditors Who Have e total claims from Part	Unsecured Claims (Officia 1 (priority unsecured claim	Form 106E/F) s) from line 6e of <i>Schedule E/F</i>	\$	114,077.00
	3b. Copy the	e total claims from Part	2 (nonpriority unsecured c	laims) from line 6j of Schedule E/F	\$	932,760.00
				Your total liabiliti	es \$	1,693,145.00
Par	rt 3: Summa	arize Your Income and	Expenses			
4.		Your Income (Official Foombined monthly incom		<i>L</i>	\$	32,796.00
5.	Schedule J: Copy your m	Your Expenses (Official onthly expenses from li	Form 106J) ne 22c of Schedule J		\$	13,104.00
Par	rt 4: Answer	r These Questions for	Administrative and Statis	stical Records		
6.	•	•	er Chapters 7, 11, or 13?	hook this hay and authorit this farm to the court with		andra da da a

- □ No. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules.
- Yes
- 7. What kind of debt do you have?
 - Your debts are primarily consumer debts. Consumer debts are those "incurred by an individual primarily for a personal, family, or household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159.
 - Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules.

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

4:19-bk-16123 Doc#: 1 Filed: 11/15/19 Entered: 11/15/19 16:43:00 Page 9 of 65

Case number (if known)

7.10 DK 10120	D0011. I	i iica. II/Io/Io	LINCICA. 11/10/10 10.40.00	i age 5 oi 6

From the Statement of Your Current Monthly Income: Copy your total current monthly income from Official Form 122A-1 Line 11; **OR**, Form 122B Line 11; **OR**, Form 122C-1 Line 14.

Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

Debtor 1 **Terry Don Peery**

From Part 4 on <i>Schedule E/F</i> , copy the following:	Total	claim
9a. Domestic support obligations (Copy line 6a.)	\$	0.00
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$	114,077.00
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$	0.00
9d. Student loans. (Copy line 6f.)	\$	140,200.00
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$	0.00
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+\$	0.00
9g. Total. Add lines 9a through 9f.	\$	254,277.00

	n this information	to identify	your case and the	his filind	q:			
Deb	_	ry Don P	•		a.			
	First I			e Name	Last Name			
	tor 2 se, if filing) First I	Name	Middle	e Name	Last Name			
Unit	ed States Bankruptc	y Court fo	the: EASTERN	DISTRI	ICT OF ARKANSAS			
Cas	e number							☐ Check if this is an amended filing
Ott	icial Form 1	06 A /E						·
	icial Form 1 hedule A	_	_					12/15
it fits	best. Be as complete	and accura	ite as possible. If tw	o marrie	only once. If an asset fits in more than o ed people are filing together, both are equ e top of any additional pages, write your i	ually responsible	for supplying	correct information. If
Part	1: Describe Each Re	sidence, B	uilding, Land, or Oth	ner Real I	Estate You Own or Have an Interest In			
1. D c	you own or have any	legal or eq	uitable interest in ar	ny reside	ence, building, land, or similar property?			
	No. Go to Part 2. Yes. Where is the property	. 0						
-	res. Where is the prop	perty?						
1.1	res. Wriere is the proj	репу?		What	t is the property? Check all that apply			
1.1	515 Cheshier Co	ourt	scription	What ■ □	t is the property? Check all that apply Single-family home Duplex or multi-unit building Condominium or cooperative	amount of	any secured cla	nims or exemptions. Put the nims on <i>Schedule D:</i> ns <i>Secured by Property</i> .
1.1	515 Cheshier Co Street address, if available Jacksonville	ourt e, or other de AR	72076-0000		Single-family home Duplex or multi-unit building Condominium or cooperative Manufactured or mobile home Land	amount of Creditors V	any secured cla Who Have Clain ulue of the perty?	current value of the portion you own?
1.1	515 Cheshier Cc Street address, if available	DURT e, or other de			Single-family home Duplex or multi-unit building Condominium or cooperative Manufactured or mobile home Land Investment property Timeshare	Current va entire pro \$20 Describe t (such as fo	any secured cla Who Have Clain Islue of the oerty? 00,000.00 he nature of yees simple, tena	aims on Schedule D: ns Secured by Property. Current value of the
1.1	515 Cheshier Co Street address, if available Jacksonville City	ourt e, or other de AR	72076-0000		Single-family home Duplex or multi-unit building Condominium or cooperative Manufactured or mobile home Land Investment property Timeshare Other has an interest in the property? Check one Debtor 1 only	Current va entire prop \$20 Describe t (such as full)	any secured cla Who Have Clain ulue of the perty? 00,000.00 he nature of ye	current value of the portion you own? \$200,000.00
1.1	515 Cheshier Co Street address, if available Jacksonville	ourt e, or other de AR	72076-0000		Single-family home Duplex or multi-unit building Condominium or cooperative Manufactured or mobile home Land Investment property Timeshare Other has an interest in the property? Check one Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only	Current vaentire proj \$20 Describe t (such as for a life estate	any secured clawho Have Clain alue of the perty? 00,000.00 he nature of yee simple, tende), if known.	current value of the portion you own? \$200,000.00
1.1	515 Cheshier Co Street address, if available Jacksonville City	ourt e, or other de AR	72076-0000		Single-family home Duplex or multi-unit building Condominium or cooperative Manufactured or mobile home Land Investment property Timeshare Other has an interest in the property? Check one Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only	Current vaentire proj \$20 Describe t (such as for a life estate)	any secured cla Who Have Clain Islue of the oerty? 00,000.00 he nature of yee simple, tense), if known.	Current value of the portion you own? \$200,000.00 our ownership interest ancy by the entireties, or

Do you own, lease, or have legal or equitable interest in any vehicles, whether they are registered or not? Include any vehicles you own that someone else drives. If you lease a vehicle, also report it on Schedule G: Executory Contracts and Unexpired Leases.

8. Collectibles of value

Examples: Antiques and figurines; paintings, prints, or other artwork; books, pictures, or other art objects; stamp, coin, or baseball card collections; other collections, memorabilia, collectibles

■ No

☐ Yes. Describe.....

4:19-bk-16123 Doc#: 1 Filed: 11/15/19 Entered: 11/15/19 16:43:00 Page 12 of 65

D	ebtor 1	Terry Don P	eery Case number (if kr	nown)
9.	Equipme Example	ent for sports a es: Sports, photo musical instr	ographic, exercise, and other hobby equipment; bicycles, pool tables, golf clubs, skis; ca	anoes and kayaks; carpentry tools;
	■ No □ Yes.	Describe		
10.	□ No		s, shotguns, ammunition, and related equipment	
			firearms, sports & hobby equipment	\$1,200.00
11.	□ No		othes, furs, leather coats, designer wear, shoes, accessories	
			clothing	\$200.00
12.	☐ No		welry, costume jewelry, engagement rings, wedding rings, heirloom jewelry, watches, g	ems, gold, silver
			jewelry	\$300.00
13.	Examp □ No □	rm animals bles: Dogs, cats, Describe	birds, horses	
			2 dogs	\$1.00
14.	☐ No	ner personal an	d household items you did not already list, including any health aids you did not formation misc handtools	list \$100.00
15			of all of your entries from Part 3, including any entries for pages you have attache number here	\$6,201.00
		scribe Your Finand In or have any l	cial Assets egal or equitable interest in any of the following?	Current value of the portion you own? Do not deduct secured claims or exemptions.
16	☐ No		have in your wallet, in your home, in a safe deposit box, and on hand when you file you	petition
			Cash	\$100.00

Debtor 1 Case number (if known) Terry Don Peery 17. Deposits of money Examples: Checking, savings, or other financial accounts; certificates of deposit; shares in credit unions, brokerage houses, and other similar institutions. If you have multiple accounts with the same institution, list each. ☐ No Institution name: ■ Yes..... various accounts First AR Bank & Trust \$9,300.00 18. Bonds, mutual funds, or publicly traded stocks Examples: Bond funds, investment accounts with brokerage firms, money market accounts ☐ Yes..... Institution or issuer name: 19. Non-publicly traded stock and interests in incorporated and unincorporated businesses, including an interest in an LLC, partnership, and joint venture □ No ■ Yes. Give specific information about them..... Name of entity: % of ownership: AR Quick Care, PA 100 % \$5.00 20. Government and corporate bonds and other negotiable and non-negotiable instruments Negotiable instruments include personal checks, cashiers' checks, promissory notes, and money orders. Non-negotiable instruments are those you cannot transfer to someone by signing or delivering them. ☐ Yes. Give specific information about them Issuer name: 21. Retirement or pension accounts Examples: Interests in IRA, ERISA, Keogh, 401(k), 403(b), thrift savings accounts, or other pension or profit-sharing plans □ No Yes. List each account separately. Institution name: Type of account: 401(k) \$10,000.00 22. Security deposits and prepayments Your share of all unused deposits you have made so that you may continue service or use from a company Examples: Agreements with landlords, prepaid rent, public utilities (electric, gas, water), telecommunications companies, or others ☐ Yes. Institution name or individual: 23. Annuities (A contract for a periodic payment of money to you, either for life or for a number of years) ■ No Issuer name and description. ☐ Yes..... 24. Interests in an education IRA, in an account in a qualified ABLE program, or under a qualified state tuition program. 26 U.S.C. §§ 530(b)(1), 529A(b), and 529(b)(1). ■ No Institution name and description. Separately file the records of any interests.11 U.S.C. § 521(c): ☐ Yes..... 25. Trusts, equitable or future interests in property (other than anything listed in line 1), and rights or powers exercisable for your benefit ■ No ☐ Yes. Give specific information about them... 26. Patents, copyrights, trademarks, trade secrets, and other intellectual property Examples: Internet domain names, websites, proceeds from royalties and licensing agreements ☐ Yes. Give specific information about them...

4:19-bk-16123 Doc#: 1 Filed: 11/15/19 Entered: 11/15/19 16:43:00 Page 13 of 65

	4:19-bk-16123	Doc#: 1	Filed: 11/15/19	Entered: 11/15/19 16:43:00	Page 14 of 65
Debtor 1	Terry Don Peery			Case number (if kn	own)
Exan ■ No	uses, franchises, and on ples: Building permits, s. Give specific information	exclusive licens	es, cooperative associati	on holdings, liquor licenses, professional	licenses
Money o	r property owed to you	1?			Current value of the portion you own? Do not deduct secured claims or exemptions.
■ No	efunds owed to you s. Give specific informati	ion about them,	including whether you all	ready filed the returns and the tax years	
<i>Exan</i> ■ No	ly support nples: Past due or lump s. Give specific informati	,,	pousal support, child sup	port, maintenance, divorce settlement, pr	operty settlement
Exan	r amounts someone ov nples: Unpaid wages, di benefits; unpaid l	sability insurand oans you made		nefits, sick pay, vacation pay, workers' c	ompensation, Social Security
Exan ■ No	s. Name the insurance c	or life insurance	n policy and list its value.	(HSA); credit, homeowner's, or renter's in Beneficiary:	Surrender or refund value:
If you some		a living trust, exp	om someone who has doect proceeds from a life	ied insurance policy, or are currently entitled	to receive property because
Exan ■ No		yment disputes	ot you have filed a laws , insurance claims, or righ	uit or made a demand for payment its to sue	
■ No	contingent and unliques. Describe each claim.		of every nature, includi	ng counterclaims of the debtor and rig	hts to set off claims
■ No	inancial assets you did	•	st		
		•	,	any entries for pages you have attache	d \$19,405.00
Part 5: D	escribe Any Business-Re	lated Property Yo	ou Own or Have an Interest	In. List any real estate in Part 1.	
■ No. G	own or have any legal or Go to Part 6. Go to line 38.	equitable interes	t in any business-related pr	operty?	

4:19-bk-16123 Doc#: 1 Filed: 11/15/19 Entered: 11/15/19 16:43:00 Page 15 of 65

Debt	or 1	Terry Don Peery		Case number (if known)	
Part		scribe Any Farm- and Commercial Fishing-Related Property You Cou own or have an interest in farmland, list it in Part 1.	wn or Have an Interest	ln.	
46. C	o you	own or have any legal or equitable interest in any farm-	or commercial fishir	ng-related property?	
	No.	Go to Part 7.			
I	☐ Yes.	Go to line 47.			
Part	7:	Describe All Property You Own or Have an Interest in That You I	Did Not List Above		
	Examp No	have other property of any kind you did not already list? eles: Season tickets, country club membership			
	Yes.	Give specific information			
		he dollar value of all of your entries from Part 7. Write that	at number here		\$0.00
Part	o: _	List the Totals of Each Part of this Form			
55.	Part 1	: Total real estate, line 2		<u>-</u>	\$200,000.00
56.	Part 2	2: Total vehicles, line 5	\$8,500.00		
57.	Part 3	: Total personal and household items, line 15	\$6,201.00		
58.	Part 4	: Total financial assets, line 36	\$19,405.00		
59.	Part 5	: Total business-related property, line 45	\$0.00		
60.	Part 6	: Total farm- and fishing-related property, line 52	\$0.00		
61.	Part 7	: Total other property not listed, line 54 +	\$0.00		
62.	Total	personal property. Add lines 56 through 61	\$34,106.00	Copy personal property total	\$34,106.00
63.	Total	of all property on Schedule A/B. Add line 55 + line 62			\$234,106.00

Debtor 1	Terry Don Peery			
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States B	ankruptcy Court for the:	EASTERN DISTRICT O	DF ARKANSAS	
Case number				
(if known)				☐ Check if this is an amended filing
Official Fo	orm 106C			
			N	
SCHARIII	IA (: I NA Pro	operty you (Claim as Exempt	4/19

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

Pa	rt 1: Identify the Property You Claim as E	Exempt								
1.	Which set of exemptions are you claiming? Check one only, even if your spouse is filing with you.									
	☐ You are claiming state and federal nonbar	nkruptcy exemptions.	11 U.S	S.C. § 522(b)(3)						
	■ You are claiming federal exemptions. 11	U.S.C. § 522(b)(2)								
2.	For any property you list on Schedule A/B that you claim as exempt, fill in the information below.									
	Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own	Amo	ount of the exemption you claim	Specific laws that allow exemption					
		Copy the value from Schedule A/B	Che	ck only one box for each exemption.						
	2007 Dodge Charger 228,000 miles Line from Schedule A/B: 3.1	\$3,500.00		\$3,500.00	11 U.S.C. § 522(d)(2)					
	Line Irom Scheaule A/B: 3.1			100% of fair market value, up to any applicable statutory limit						
	2007 Ford Explorer 100,000+ miles Line from Schedule A/B: 3.2	\$5,000.00		\$2,000.00	11 U.S.C. § 522(d)(5)					
	Line Holli Schedule PVD. 3.2			100% of fair market value, up to any applicable statutory limit						
	household goods & furnishings Line from Schedule A/B: 6.1	\$4,000.00		\$4,000.00	11 U.S.C. § 522(d)(3)					
	Line from Scriedule AVB: 0.1			100% of fair market value, up to any applicable statutory limit						
	electronics Line from Schedule A/B: 7.1	\$400.00		\$400.00	11 U.S.C. § 522(d)(3)					
	Line Irom Schedule A/B. 1.1			100% of fair market value, up to any applicable statutory limit						
	firearms, sports & hobby equipment Line from Schedule A/B: 10.1	\$1,200.00		\$1,200.00	11 U.S.C. § 522(d)(5)					
	LINE HOLL SCHEUUIE PAB. 10.1			100% of fair market value, up to any applicable statutory limit						

4:19-bk-16123 Doc#: 1 Filed: 11/15/19 Entered: 11/15/19 16:43:00 Page 17 of 65

De	ebtor 1 Terry Don Peery			Case number (if known)	
	Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own	Amo	ount of the exemption you claim	Specific laws that allow exemption
		Copy the value from Schedule A/B	Che	ck only one box for each exemption.	
	clothing Line from Schedule A/B: 11.1	\$200.00		\$200.00	11 U.S.C. § 522(d)(3)
	Line IIom Schedule A/L. TTT			100% of fair market value, up to any applicable statutory limit	
	jewelry Line from Schedule A/B: 12.1	\$300.00		\$300.00	11 U.S.C. § 522(d)(4)
	Line Horr Goriculate A.D. 12.1			100% of fair market value, up to any applicable statutory limit	
	misc handtools Line from Schedule A/B: 14.1	\$100.00		\$100.00	11 U.S.C. § 522(d)(5)
	Line IIom Schedule A/D. 14.1			100% of fair market value, up to any applicable statutory limit	
	Cash Line from Schedule A/B: 16.1	\$100.00		\$100.00	11 U.S.C. § 522(d)(5)
	Line from Genedate A/L. 10.1			100% of fair market value, up to any applicable statutory limit	
	various accounts: First AR Bank & Trust	\$9,300.00		\$9,300.00	11 U.S.C. § 522(d)(5)
	Line from Schedule A/B: 17.1			100% of fair market value, up to any applicable statutory limit	
	AR Quick Care, PA 100 % ownership	\$5.00		\$5.00	11 U.S.C. § 522(d)(5)
	Line from Schedule A/B: 19.1			100% of fair market value, up to any applicable statutory limit	
	401(k): . Line from <i>Schedule A/B</i> : 21.1	\$10,000.00		\$10,000.00	11 U.S.C. § 522(d)(10)(E)
	Line Horri Schedule A.B. 21.1			100% of fair market value, up to any applicable statutory limit	
3.	Are you claiming a homestead exemption (Subject to adjustment on 4/01/22 and every			iled on or after the date of adjustme	nt.)
	Yes. Did you acquire the property cove	red by the exemption w	ithin 1	,215 days before you filed this case	?
	□ No □ Yes				
	- 100				

Fill in this information to ident	tifv vour	case:				
Debtor 1 Terry Don	Peery	Middle Name				
First Name		Middle Name Last Name				
Debtor 2 (Spouse if, filing) First Name		Middle Name Last Name				
United States Bankruptcy Court	for the:	EASTERN DISTRICT OF ARKANSAS				
Case number						
(if known)				☐ Check	if this is an	
				ameno	led filing	
Official Form 106D						
-	tors !	Who Have Claims Secure	d by Property	,	12/15	
Scriedule D. Credi	1013	WIIO Have Claims Secure	d by Property		12/13	
		wo married people are filing together, both are eq umber the entries, and attach it to this form. On t				
1. Do any creditors have claims secu	ured by yo	our property?				
		s form to the court with your other schedules.	You have nothing else to	o report on this form.		
Yes. Fill in all of the inform		·	2 2			
		elow.				
Part 1: List All Secured Clai			. Column A	Column B	Column C	
		re than one secured claim, list the creditor separately ticular claim, list the other creditors in Part 2. As muc	tor .	Value of collateral	Unsecured	
as possible, list the claims in alphabet			Do not deduct the	that supports this	portion	
2.1 IRS		Describe the property that secures the claim:	value of collateral. \$54,308.00	\$200,000.00	If any \$14,308.00	
Creditor's Name		515 Cheshier Court Jacksonville,		Ψ200,000.00	Ψ14,500.00	
		AR 72076 Pulaski County				
P.O. Box 21126		As of the date you file, the claim is: Check all that				
Philadelphia, PA 19114	4	apply. Contingent				
Number, Street, City, State & Zip Co		Unliquidated				
, , ,		☐ Disputed				
Who owes the debt? Check one.	ı	Nature of lien. Check all that apply.				
Debtor 1 only	l	\square An agreement you made (such as mortgage or se	ecured			
Debtor 2 only		car loan)				
Debtor 1 and Debtor 2 only		☐ Statutory lien (such as tax lien, mechanic's lien)				
☐ At least one of the debtors and and	other	☐ Judgment lien from a lawsuit				
☐ Check if this claim relates to a community debt	١	Other (including a right to offset) Tax Lien				
Date debt was incurred		Last 4 digits of account number				
2.2 Regions		Describe the property that secures the claim:	\$388,000.00	\$30,000.00	\$358,000.00	
Creditor's Name		equipment - corporation owns				
P.O. Box 11407		As of the date you file, the claim is: Check all that				
Birmingham, AL 35246		apply. Contingent				
Number, Street, City, State & Zip Co		☐ Unliquidated				
		☐ Disputed				
Who owes the debt? Check one.		Nature of lien. Check all that apply.				
Debtor 1 only		An agreement you made (such as mortgage or se	ecured			
Debtor 2 only		car loan)				
☐ Debtor 1 and Debtor 2 only	1	☐ Statutory lien (such as tax lien, mechanic's lien)				
☐ At least one of the debtors and and		☐ Judgment lien from a lawsuit				
☐ Check if this claim relates to a community debt		Other (including a right to offset)				
•						
Date debt was incurred		Last 4 digits of account number husin	nace daht			

Official Form 106D

4:19-bk-16123 Doc#: 1 Filed: 11/15/19 Entered: 11/15/19 16:43:00 Page 19 of 65

Debtor 1 Terry Don Peery		Case number (if known)		
First Name Middle N	Name Last Name			
2.3 Regions	Describe the property that secures the claim:	\$41,000.00	\$30,000.00	\$41,000.00
Creditor's Name	equipment - corporation owns	Ψ+1,000.00	Ψου,σου.σο	<u> </u>
	As of the date you file, the claim is: Check all that			
P.O. Box 11407 Birmingham, AL 35246	apply.			
Number, Street, City, State & Zip Code	☐ Contingent☐ Unliquidated			
Number, Street, Sity, State & Zip Sode	☐ Disputed			
Who owes the debt? Check one.	Nature of lien. Check all that apply.			
■ Debtor 1 only	An agreement you made (such as mortgage or se	cured		
Debtor 2 only	car loan)			
☐ Debtor 1 and Debtor 2 only	☐ Statutory lien (such as tax lien, mechanic's lien)			
At least one of the debtors and another	☐ Judgment lien from a lawsuit			
☐ Check if this claim relates to a community debt	Other (including a right to offset) 2nd on ed	juipment		
Date debt was incurred	Last 4 digits of account number busin	ness debt		
2.4 Regions Mortgage	Describe the property that secures the claim:	\$160,000.00	\$200,000.00	\$0.00
Creditor's Name	515 Cheshier Court Jacksonville,			
	AR 72076 Pulaski County			
D.O. Day 40004	As of the date you file, the claim is: Check all that			
P.O. Box 18001 Hattiesburg, MS 39404	apply.			
Number, Street, City, State & Zip Code	☐ Contingent☐ Unliquidated			
	☐ Disputed			
Who owes the debt? Check one.	Nature of lien. Check all that apply.			
Debtor 1 only	\square An agreement you made (such as mortgage or se	cured		
Debtor 2 only	car loan)			
☐ Debtor 1 and Debtor 2 only	☐ Statutory lien (such as tax lien, mechanic's lien)			
At least one of the debtors and another	Judgment lien from a lawsuit			
☐ Check if this claim relates to a community debt	Other (including a right to offset)			
Date debt was incurred	Last 4 digits of account number			
2.5 State Farm Bank	Describe the property that secures the claim:	\$3,000.00	\$5,000.00	\$0.00
Creditor's Name	2007 Ford Explorer 100,000+ miles			<u> </u>
DO Dov. 2220	As of the date you file, the claim is: Check all that			
PO Box 2328 Bloomington, IL 61702	apply. Contingent			
Number, Street, City, State & Zip Code	☐ Contingent☐ Unliquidated			
	☐ Disputed			
Who owes the debt? Check one.	Nature of lien. Check all that apply.			
Debtor 1 only	\square An agreement you made (such as mortgage or se	cured		
☐ Debtor 2 only	car loan)			
Debtor 1 and Debtor 2 only	Statutory lien (such as tax lien, mechanic's lien)			
At least one of the debtors and another	Judgment lien from a lawsuit			
☐ Check if this claim relates to a community debt	Other (including a right to offset)			
Date debt was incurred	Last 4 digits of account number			
Add the dollar value of your entries in C	column A on this page. Write that number here:	\$646,308.0	00	
If this is the last page of your form, add	· -	\$646,308.0		
Write that number here:		Ψ0+0,500.0		

Official Form 106D

4:19-bk-16123 Doc#: 1 Filed: 11/15/19 Entered: 11/15/19 16:43:00 Page 20 of 65

Debto	r 1 Terry Don Peery	1		Case number (if known)
	First Name	Middle Name	Last Name	
Part 2	List Others to Be N	otified for a Debt Th	at You Already Listed	
to coll	ect from you for a debt yo	u owe to someone else, t you listed in Part 1, list	list the creditor in Part 1, and t	nat you already listed in Part 1. For example, if a collection agency is trying hen list the collection agency here. Similarly, if you have more than one f you do not have additional persons to be notified for any debts in Part 1,
	Name, Number, Street, Cit Pioneer Credit Rec P.O. Box 189 Arcade, NY 14009	•		On which line in Part 1 did you enter the creditor? Last 4 digits of account number
	Name, Number, Street, Cit U.S. Small Busines 2 North 20th Street Suite 320 Birmingham, AL 35	s Admin.		On which line in Part 1 did you enter the creditor? Last 4 digits of account number
	Name, Number, Street, Cit U.S. Small Busines 2 North 20th Street Suite 320 Birmingham, AL 35	s Admin.		On which line in Part 1 did you enter the creditor? _2.3_ Last 4 digits of account number

4:19-bk-16123 Doc#: 1 Filed: 11/15/19 Entered: 11/15/19 16:43:00 Page 21 of 65

	.5 bk 10126 Boom. 1	1 1100. 11/10/1	.o Entered. 11	710/10 10.40.0	o rage 21	01 00
Fill in this info	ormation to identify your case	:				
Debtor 1	Terry Don Peery					
Debier 1	First Name	Middle Name	Last Name			
Debtor 2						
(Spouse if, filing)	First Name	Middle Name	Last Name			
United States E	Bankruptcy Court for the: EA	STERN DISTRICT OF	ARKANSAS			
Case number						
(if known)					☐ Check	if this is an
					amend	led filing
Official Fo	rm 106F/F					
	E/F: Creditors Who	Have Uncocur	od Claime			12/15
	and accurate as possible. Use Part					
number (if known	•	·	Part, do not file that Part	On the top of any add	tional pages, write y	our name and case
	All of Your PRIORITY Unsecu					
	itors have priority unsecured clair	ns against you?				
☐ No. Go to	Part 2.					
Yes.						
identify what possible, list	our priority unsecured claims. If a country per of claim it is. If a claim has both the claims in alphabetical order accountry on the creditor holds a particular claim.	n priority and nonpriority amount ording to the creditor's name	ounts, list that claim here a e. If you have more than tw	nd show both priority an	d nonpriority amounts.	As much as
	anation of each type of claim, see the	<i>'</i>				
(, 5, 5,,, 5, 4, 5	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		,	Total claim	Priority amount	Nonpriority amount
2.1 DF&A	L.	Last 4 digits of ac	count number	\$10,515.00	\$10,515.00	\$0.00
Legal	Creditor's Name Counsel Room 2380	When was the deb	ot incurred?			
	DX 3493					
	Rock, AR 72203-3493 Street City State Zip Code	As of the date you	file, the claim is: Check	all that apply		
Who incur	red the debt? Check one.	☐ Contingent	•	11.7		
■ Debtor	1 only	☐ Unliquidated				
☐ Debtor 2	2 only	☐ Disputed				
☐ Debtor 1	1 and Debtor 2 only	Type of PRIORITY	unsecured claim:			
☐ At least	one of the debtors and another	☐ Domestic suppo	ort obligations			
	f this claim is for a community de	ebt Taxes and certa	ain other debts you owe the	e government		
	n subject to offset?	_	h or personal injury while y	•		
■ No	•	Other. Specify	•			
☐ Yes			business debt			

4:19-bk-16123 Doc#: 1 Filed: 11/15/19 Entered: 11/15/19 16:43:00 Page 22 of 65

Debto	Terry Don Peery	Case num	Der (it known)		
2.2	IRS	Last 4 digits of account number	\$103,562.0 0	\$103,562.00	\$0.00
	Priority Creditor's Name P.O. Box 21126	When was the debt incurred?			
	Philadelphia, PA 19114 Number Street City State Zip Code	As of the date you file, the claim is: Check all that	at apply		
V	Who incurred the debt? Check one.	☐ Contingent			
I	Debtor 1 only	☐ Unliquidated			
Г	Debtor 2 only	☐ Disputed			
_	Debtor 1 and Debtor 2 only	Type of PRIORITY unsecured claim:			
_	☐ At least one of the debtors and another	☐ Domestic support obligations			
_	<u>_</u>	■ Taxes and certain other debts you owe the gove	ornmont		
	☐ Check if this claim is for a community debt sthe claim subject to offset?	Claims for death or personal injury while you we			
_	No	Other. Specify			
	☐ Yes	2015 & 2016 income			
2.3	Jackie Peery	Last 4 digits of account number	\$0.00	\$0.00	\$0.00
	Priority Creditor's Name 9 Newberry Lane Jacksonville, AR 72076	When was the debt incurred?			
	Number Street City State Zip Code	As of the date you file, the claim is: Check all that	at apply		
٧	Who incurred the debt? Check one.	☐ Contingent			
	Debtor 1 only	☐ Unliquidated			
	Debtor 2 only	Disputed			
	Debtor 1 and Debtor 2 only	Type of PRIORITY unsecured claim:			
	☐ At least one of the debtors and another	■ Domestic support obligations			
_	☐ Check if this claim is for a community debt	☐ Taxes and certain other debts you owe the gove	ernment		
	s the claim subject to offset?	☐ Claims for death or personal injury while you we			
_	No No	☐ Other. Specify			
	☐Yes	monthly alimony			
Part 2	List All of Your NONPRIORITY Unsecu	red Claims			
3. Do	any creditors have nonpriority unsecured claims				
	No. You have nothing to report in this part. Submit the	-			
_		ile form to the court war your carer correction.			
	Yes.				
cla	at all of your nonpriority unsecured claims in the a tim, list the creditor separately for each claim. For each aditor holds a particular claim, list the other creditors in	h claim listed, identify what type of claim it is. Do not	list claims already inc	cluded in Part 1. If more th	an one art 2.
4.1	Accent Cost Containment Nonpriority Creditor's Name	Last 4 digits of account number			\$55.00
	PO Box 542007 Omaha, NE 68154-8007	When was the debt incurred?			
	Number Street City State Zip Code	As of the date you file, the claim is: Check all	that apply		
	Who incurred the debt? Check one.	☐ Contingent			
	Debtor 1 only	☐ Unliquidated			
	Debtor 2 only	☐ Disputed			
	Debtor 1 and Debtor 2 only	Type of NONPRIORITY unsecured claim:			
	At least one of the debtors and another	☐ Student loans			
	☐ Check if this claim is for a community debt Is the claim subject to offset?	☐ Obligations arising out of a separation agree report as priority claims	ment or divorce that y	ou did not	
	■ No	Debts to pension or profit-sharing plans, and	l other similar debts		
	Yes	Other. Specify business debt			

4:19-bk-16123 Doc#: 1 Filed: 11/15/19 Entered: 11/15/19 16:43:00 Page 23 of 65

Debto	or 1 Terry Don Peery	Case number (if known)	
4.2	AES Nonpriority Creditor's Name	Last 4 digits of account number	\$140,200.00
	P.O. Box 8183	When was the debt incurred?	
	Harrisburg, PA 17105 Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	<u> </u>	☐ Contingent	
	Debtor 1 only	☐ Unliquidated	
	Debtor 2 only	Disputed	
	Debtor 1 and Debtor 2 only	Type of NONPRIORITY unsecured claim:	
	At least one of the debtors and another	Student loans	
	☐ Check if this claim is for a community debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	Yes	☐ Other. Specify	
4.3	American Proficiency Institute	Last 4 digits of account number	\$369.00
	Nonpriority Creditor's Name 1159 Business Park Drive Traverse City, MI 49686	When was the debt incurred?	
	Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.	☐ Contingent	
	Debtor 1 only		
	☐ Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed Type of NONPRIORITY unsecured claim:	
	☐ At least one of the debtors and another	Student loans	
	☐ Check if this claim is for a community debt	☐ Obligations arising out of a separation agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims	
	■ No	Debts to pension or profit-sharing plans, and other similar debts	
	Yes	Other. Specify business debt	
4.4	AR Dept of Health	Last 4 digits of account number	\$137.00
	Nonpriority Creditor's Name 4815 W. Markham St. Little Rock, AR 72205-3867	When was the debt incurred?	
	Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	■ Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	Debtor 1 and Debtor 2 only	Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community debt	☐ Student loans	
	Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	Debts to pension or profit-sharing plans, and other similar debts	
	☐ Yes	_	
	ப 169	Other. Specify business debt	

4:19-bk-16123 Doc#: 1 Filed: 11/15/19 Entered: 11/15/19 16:43:00 Page 24 of 65

Debtor	1 Terry Don Peery	Case number (if known)	
4.5	Arkansas Medical Society Nonpriority Creditor's Name	Last 4 digits of account number	\$400.00
	PO Box 55088	When was the debt incurred?	
	Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim: ☐ Student loans	
	☐ Check if this claim is for a community debt		
	Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	Yes	Other. Specify business debt	
4.6	Ascensus	Last 4 digits of account number	\$576.00
	Nonpriority Creditor's Name 200 Dryden Rd	When was the debt incurred?	· · · · · · · · · · · · · · · · · · ·
	Dresher, PA 19025 Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	■ Debtor 1 only	☐ Contingent	
	☐ Debtor 2 only	Unliquidated	
	☐ Debtor 1 and Debtor 2 only	Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim: ☐ Student loans	
	☐ Check if this claim is for a community debt	☐ Obligations arising out of a separation agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims	
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	Yes	Other. Specify business debt	
4.7	Bank of America	Last 4 digits of account number 5638	\$9,523.00
	Nonpriority Creditor's Name PO Box 851001	When was the debt incurred?	
	Dallas, TX 75285-1001 Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	■ Debtor 1 only	☐ Contingent	
	☐ Debtor 2 only	Unliquidated	
	☐ Debtor 1 and Debtor 2 only	Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim: ☐ Student loans	
	☐ Check if this claim is for a community debt		
	Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	Yes	Other. Specify	
	÷ •	— Other. Openity	

4:19-bk-16123 Doc#: 1 Filed: 11/15/19 Entered: 11/15/19 16:43:00 Page 25 of 65

Debtor	Terry Don Peery	Case number (if known)	
4.8	Brown Janitor Supply Nonpriority Creditor's Name	Last 4 digits of account number	\$151.00
	3509 mAsher Ave Little Rock, AR 72204	When was the debt incurred?	
	Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.	☐ Contingent	
	Debtor 1 only	☐ Unliquidated	
	☐ Debtor 2 only	□ Disputed	
	☐ Debtor 1 and Debtor 2 only	Type of NONPRIORITY unsecured claim:	
	☐ At least one of the debtors and another	☐ Student loans	
	☐ Check if this claim is for a community debt Is the claim subject to offset?	\square Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	No	lacksquare Debts to pension or profit-sharing plans, and other similar debts	
	Yes	Other. Specify business debt	
4.9	Cabot Office Machines	Last 4 digits of account number	\$903.00
	Nonpriority Creditor's Name PO Box 1204 Cabot. AR 72023	When was the debt incurred?	
	Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.	☐ Contingent	
	■ Debtor 1 only	☐ Unliquidated	
	☐ Debtor 2 only	☐ Disputed	
	☐ Debtor 1 and Debtor 2 only	Type of NONPRIORITY unsecured claim:	
	☐ At least one of the debtors and another	☐ Student loans	
	☐ Check if this claim is for a community debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	Yes	Other. Specify business debt	
4.10	Capital Fire Extinguisher	Last 4 digits of account number	\$52.00
	Nonpriority Creditor's Name PO Box 6245 North Little Rock, AR 72124	When was the debt incurred?	
	Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.	☐ Contingent	
	■ Debtor 1 only	☐ Unliquidated	
	☐ Debtor 2 only	☐ Disputed	
	☐ Debtor 1 and Debtor 2 only	Type of NONPRIORITY unsecured claim:	
	\square At least one of the debtors and another	☐ Student loans	
	☐ Check if this claim is for a community debt	☐ Obligations arising out of a separation agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims	
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	Yes	■ Other. Specify business debt	
		· · · -	

4:19-bk-16123 Doc#: 1 Filed: 11/15/19 Entered: 11/15/19 16:43:00 Page 26 of 65

Debtor	1 Terry Don Peery	Case number (if known)	
4.11	Centerpoint Energy Nonpriority Creditor's Name	Last 4 digits of account number	Unknown
	Attn: Bankruptcy J. Simpson P.O. Box 1700 Houston, TX 77251-9857	When was the debt incurred?	
	Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.	☐ Contingent	
	Debtor 1 only	☐ Unliquidated	
	Debtor 2 only	☐ Disputed	
	Debtor 1 and Debtor 2 only	Type of NONPRIORITY unsecured claim:	
	☐ At least one of the debtors and another	☐ Student loans	
	☐ Check if this claim is for a community debt Is the claim subject to offset?	$\hfill\square$ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	Debts to pension or profit-sharing plans, and other similar debts	
	Yes	■ Other. Specify business debt	
4.12	City of Jacksonville Ambulance	Last 4 digits of account number	\$350.00
	Nonpriority Creditor's Name PO Box 126 Jacksonville, AR 72076	When was the debt incurred?	
	Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.	☐ Contingent	
	■ Debtor 1 only	☐ Unliquidated	
	☐ Debtor 2 only	☐ Disputed	
	☐ Debtor 1 and Debtor 2 only	Type of NONPRIORITY unsecured claim:	
	☐ At least one of the debtors and another	☐ Student loans	
	☐ Check if this claim is for a community debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	Yes	Other. Specify business debt	
	Li Tes	Other. Specify Dusiness debt	
4.13	CLIA Laboratory Program Nonpriority Creditor's Name	Last 4 digits of account number	\$150.00
	PO Box 530882 Atlanta, GA 30353-0882	When was the debt incurred?	
	Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.	☐ Contingent	
	■ Debtor 1 only	☐ Unliquidated	
	☐ Debtor 2 only	☐ Disputed	
	☐ Debtor 1 and Debtor 2 only	Type of NONPRIORITY unsecured claim:	
	\square At least one of the debtors and another	☐ Student loans	
	☐ Check if this claim is for a community debt Is the claim subject to offset?	\square Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	No	\square Debts to pension or profit-sharing plans, and other similar debts	
	Yes	Other. Specify business debt	
		<u> </u>	

4:19-bk-16123 Doc#: 1 Filed: 11/15/19 Entered: 11/15/19 16:43:00 Page 27 of 65

Debtor	1 Terry Don Peery	Case number (if known)	
4.14	Entergy Arkansas, Inc Nonpriority Creditor's Name	Last 4 digits of account number	\$394.00
	P.O. Box 61830 New Orleans, LA 70161-1830	When was the debt incurred?	
	Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.	☐ Contingent	
	Debtor 1 only	☐ Unliquidated	
	Debtor 2 only	☐ Disputed	
	Debtor 1 and Debtor 2 only	Type of NONPRIORITY unsecured claim:	
	At least one of the debtors and another	☐ Student loans	
	☐ Check if this claim is for a community debt Is the claim subject to offset?	\square Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	Yes	■ Other. Specify business debt	
4.15	Humana Military	Last 4 digits of account number	\$172.00
	Nonpriority Creditor's Name TRICARE East Region PO Box 8923	When was the debt incurred?	
	Madison, WI 53707-8923 Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.	☐ Contingent	
	Debtor 1 only	☐ Unliquidated	
	Debtor 2 only	☐ Disputed	
	Debtor 1 and Debtor 2 only	Type of NONPRIORITY unsecured claim:	
	☐ At least one of the debtors and another	☐ Student loans	
	☐ Check if this claim is for a community debt Is the claim subject to offset?	\square Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	lacksquare Debts to pension or profit-sharing plans, and other similar debts	
	Yes	■ Other. Specify	
4.16	InstaMed	Last 4 digits of account number	\$75.00
	Nonpriority Creditor's Name 1880 John F. Kennedy Blvd 12th Floor	When was the debt incurred?	
	Philadelphia, PA 19103		
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	_	☐ Contingent	
	Debtor 1 only	☐ Unliquidated	
	Debtor 2 only	Disputed	
	Debtor 1 and Debtor 2 only	Type of NONPRIORITY unsecured claim:	
	At least one of the debtors and another	☐ Student loans	
	☐ Check if this claim is for a community debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	☐ Yes	■ Other. Specify business debt	
		— Outer, Specify	

4:19-bk-16123 Doc#: 1 Filed: 11/15/19 Entered: 11/15/19 16:43:00 Page 28 of 65

Debtor 1	Terry Don Peery	Case number (if known)	
	Jackie Peery	Last 4 digits of account number	\$60,000.00
	Nonpriority Creditor's Name 9 Newberry Lane Jacksonville, AR 72076	When was the debt incurred?	
	Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
,	Who incurred the debt? Check one.	☐ Contingent	
	Debtor 1 only	☐ Unliquidated	
	☐ Debtor 2 only	☐ Disputed	
	Debtor 1 and Debtor 2 only	Type of NONPRIORITY unsecured claim:	
	At least one of the debtors and another	☐ Student loans	
	☐ Check if this claim is for a community debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	Yes	Other. Specify business debt	
	Jacksonville Chamber/Commerce	Last 4 digits of account number	\$450.00
	Nonpriority Creditor's Name 200 Dupree Dr. Jacksonvillo, AB 72076	When was the debt incurred?	
	Jacksonville, AR 72076 Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
,	Who incurred the debt? Check one.	☐ Contingent	
	Debtor 1 only	☐ Unliquidated	
	☐ Debtor 2 only	☐ Disputed	
	☐ Debtor 1 and Debtor 2 only	Type of NONPRIORITY unsecured claim:	
	☐ At least one of the debtors and another	☐ Student loans	
	☐ Check if this claim is for a community debt	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	Yes	Other. Specify business debt	
	Jim Cope, MT	Last 4 digits of account number	\$1,200.00
	Nonpriority Creditor's Name PO Box 1212 Magnitude AB 72110	When was the debt incurred?	
	Morrilton, AR 72110 Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.	☐ Contingent	
	Debtor 1 only	☐ Unliquidated	
	Debtor 2 only	Disputed	
	Debtor 1 and Debtor 2 only	Type of NONPRIORITY unsecured claim:	
	At least one of the debtors and another	☐ Student loans	
	☐ Check if this claim is for a community debt	\square Obligations arising out of a separation agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims	
	No No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	☐ Yes	Other. Specify business debt	

4:19-bk-16123 Doc#: 1 Filed: 11/15/19 Entered: 11/15/19 16:43:00 Page 29 of 65

Debtor	1 Terry Don Peery	Case number (if known)	
4.20	JVL Security Nonpriority Creditor's Name	Last 4 digits of account number	\$542.00
	PO Box 94246 North Little Rock, AR 72190	When was the debt incurred?	
-	Number Street City State Zip Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only	As of the date you file, the claim is: Check all that apply Contingent Unliquidated Disputed	
	☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another ☐ Check if this claim is for a community debt Is the claim subject to offset? ■ No	Type of NONPRIORITY unsecured claim: ☐ Student loans ☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims ☐ Debts to pension or profit-sharing plans, and other similar debts	
	Yes	Other. Specify business debt	
4.21	LabCorp Nonpriority Creditor's Name	Last 4 digits of account number	\$1,181.00
-	P.O. Box 55126 Boston, MA 02205-5126 Number Street City State Zip Code	When was the debt incurred? As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only	☐ Contingent ☐ Unliquidated ☐ Disputed Type of NONPRIORITY unsecured claim:	
	☐ At least one of the debtors and another ☐ Check if this claim is for a community debt Is the claim subject to offset?	☐ Student loans ☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No □ Yes	☐ Debts to pension or profit-sharing plans, and other similar debts ☐ Other. Specify	
4.22	Liberty National Ins. Nonpriority Creditor's Name 2001 3rd Avenue South Birmingham, AL 35233	Last 4 digits of account number When was the debt incurred?	\$675.00
-	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply ☐ Contingent	
	■ Debtor 1 only □ Debtor 2 only □ Debtor 1 and Debtor 2 only □ At least one of the debtors and another	☐ Unliquidated ☐ Disputed Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community debt Is the claim subject to offset? ■ No	 ☐ Student loans ☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims ☐ Debts to pension or profit-sharing plans, and other similar debts 	
	□ Yes	Other. Specify business debt	

4:19-bk-16123 Doc#: 1 Filed: 11/15/19 Entered: 11/15/19 16:43:00 Page 30 of 65

Debtor	1 Terry Don Peery	Case number (if known)	
4.23	McKesson Medical Surgical Nonpriority Creditor's Name	Last 4 digits of account number	\$6,623.00
	9954 Mayland Dr. Henrico, VA 23233	When was the debt incurred?	
-	Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.	☐ Contingent	
	■ Debtor 1 only	☐ Unliquidated	
	☐ Debtor 2 only	☐ Disputed	
	☐ Debtor 1 and Debtor 2 only	Type of NONPRIORITY unsecured claim:	
	☐ At least one of the debtors and another	☐ Student loans	
	☐ Check if this claim is for a community debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	Yes	Other. Specify business debt	
4.24	Medical Office Systems	Last 4 digits of account number	\$6,025.00
	Nonpriority Creditor's Name PO Box 3457	When was the debt incurred?	
-	Little Rock, AR 72203 Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.	☐ Contingent	
	■ Debtor 1 only	☐ Unliquidated	
	☐ Debtor 2 only	☐ Disputed	
	☐ Debtor 1 and Debtor 2 only	Type of NONPRIORITY unsecured claim:	
	☐ At least one of the debtors and another	☐ Student loans	
	☐ Check if this claim is for a community debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	lacksquare Debts to pension or profit-sharing plans, and other similar debts	
	Yes	Other. Specify business debt	
4.25	Medical Office Systems	Last 4 digits of account number	\$3,357.00
	Nonpriority Creditor's Name PO Box 3457	When was the debt incurred?	
-	Little Rock, AR 72203 Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	■ Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	Debtor 1 and Debtor 2 only	Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim: ☐ Student loans	
	☐ Check if this claim is for a community debt		
	Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	□Yes	■ Other. Specify business debt	
		— Outer, Specify	

4:19-bk-16123 Doc#: 1 Filed: 11/15/19 Entered: 11/15/19 16:43:00 Page 31 of 65

Debto	Terry Don Peery	Case number (if known)	
4.26	Medical Office Systems Nonpriority Creditor's Name	Last 4 digits of account number	\$4,122.00
	PO Box 3457 Little Rock, AR 72203	When was the debt incurred?	
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	_	☐ Contingent	
	Debtor 1 only	☐ Unliquidated	
	Debtor 2 only	☐ Disputed	
	Debtor 1 and Debtor 2 only	Type of NONPRIORITY unsecured claim:	
	At least one of the debtors and another	☐ Student loans	
	☐ Check if this claim is for a community debt Is the claim subject to offset?	\square Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	lacksquare Debts to pension or profit-sharing plans, and other similar debts	
	Yes	Other. Specify business debt	
4.27	Medline Industries, Inc	Last 4 digits of account number	\$3,527.00
	Nonpriority Creditor's Name Dept 1080	When was the debt incurred?	
	PO Box 121080		
	Dallas, TX 75312-1080		
	Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.	☐ Contingent	
	Debtor 1 only	☐ Unliquidated	
	Debtor 2 only	☐ Disputed	
	☐ Debtor 1 and Debtor 2 only	Type of NONPRIORITY unsecured claim:	
	☐ At least one of the debtors and another	☐ Student loans	
	☐ Check if this claim is for a community debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	Yes	Other. Specify business debt	
4.28	Orkin Pest Control	Last 4 digits of account number	\$162.00
	Nonpriority Creditor's Name 8720 I 30	When was the debt incurred?	
	Little Rock, AR 72209 Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.	☐ Contingent	
	■ Debtor 1 only	☐ Unliquidated	
	☐ Debtor 2 only	☐ Disputed	
	☐ Debtor 1 and Debtor 2 only	Type of NONPRIORITY unsecured claim:	
	\square At least one of the debtors and another	☐ Student loans	
	☐ Check if this claim is for a community debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	\square Debts to pension or profit-sharing plans, and other similar debts	
	☐Yes	Other. Specify business debt	

4:19-bk-16123 Doc#: 1 Filed: 11/15/19 Entered: 11/15/19 16:43:00 Page 32 of 65

Debtor '	Terry Don Peery	Case number (if known)	
	Pettus Office Products	Last 4 digits of account number	\$1,029.00
	Nonpriority Creditor's Name 2 Freeway Drive Little Rock, AR 72204	When was the debt incurred?	
_	Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.	☐ Contingent	
	Debtor 1 only	☐ Unliquidated	
	Debtor 2 only	☐ Disputed	
	Debtor 1 and Debtor 2 only	Type of NONPRIORITY unsecured claim:	
	☐ At least one of the debtors and another ☐ Check if this claim is for a community debt	☐ Student loans	
	Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	Debts to pension or profit-sharing plans, and other similar debts	
	Yes	Other. Specify business debt	
	Pioneer Credit Recovery, Inc.	Last 4 digits of account number	\$560,831.00
	Nonpriority Creditor's Name P.O. Box 189 Arcado NV 14000	When was the debt incurred?	
	Arcade, NY 14009 Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.	☐ Contingent	
	■ Debtor 1 only	☐ Unliquidated	
	☐ Debtor 2 only	· ·	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed Type of NONPRIORITY unsecured claim:	
	☐ At least one of the debtors and another	Student loans	
	☐ Check if this claim is for a community debt	☐ Obligations arising out of a separation agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims	
	■ No	Debts to pension or profit-sharing plans, and other similar debts	
	Yes	Other. Specify business debt	
	Prosper Funding, LLC	Last 4 digits of account number	\$4,321.00
	Nonpriority Creditor's Name 221 Main St. Ste 300	When was the debt incurred?	
_	San Francisco, CA 94105 Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.	☐ Contingent	
	Debtor 1 only	☐ Unliquidated	
	Debtor 2 only	☐ Disputed	
	Debtor 1 and Debtor 2 only	Type of NONPRIORITY unsecured claim:	
	At least one of the debtors and another	☐ Student loans	
	Check if this claim is for a community debt	Obligations arising out of a separation agreement or divorce that you did not	
	Is the claim subject to offset? No	report as priority claims ☐ Debts to pension or profit-sharing plans, and other similar debts	
	Yes	Other. Specify business debt	

4:19-bk-16123 Doc#: 1 Filed: 11/15/19 Entered: 11/15/19 16:43:00 Page 33 of 65

Debtor	1 Terry Don Peery	Case number (if known)	
4.32	Regions Bank	Last 4 digits of account number	\$1,673.00
	Nonpriority Creditor's Name Insurance Service Center PO Box 200043	When was the debt incurred?	
	Kennesaw, GA 30156-9246 Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	_	☐ Contingent	
	Debtor 1 only	☐ Unliquidated	
	Debtor 2 only	☐ Disputed	
	Debtor 1 and Debtor 2 only	Type of NONPRIORITY unsecured claim:	
	At least one of the debtors and another	☐ Student loans	
	☐ Check if this claim is for a community debt Is the claim subject to offset?	\square Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	Debts to pension or profit-sharing plans, and other similar debts	
	Yes	Other. Specify	
4.33	Regions Bankcard Nonpriority Creditor's Name	Last 4 digits of account number 9766	\$21,305.00
	PO Box 2224	When was the debt incurred?	
	Birmingham, AL 35246-3023	A control of the state of the s	
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	_	☐ Contingent	
	Debtor 1 only	☐ Unliquidated	
	Debtor 2 only	☐ Disputed	
	Debtor 1 and Debtor 2 only	Type of NONPRIORITY unsecured claim:	
	At least one of the debtors and another	☐ Student loans	
	☐ Check if this claim is for a community debt Is the claim subject to offset?	\square Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	No	Debts to pension or profit-sharing plans, and other similar debts	
	Yes	Other. Specify business debt	
4.34	Slate by Chase	Last 4 digits of account number 9350	\$12,657.00
	Nonpriority Creditor's Name PO Box 94014 Palatine, IL 60094	When was the debt incurred?	
	Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.	☐ Contingent	
	■ Debtor 1 only		
	Debtor 2 only	☐ Unliquidated	
	Debtor 1 and Debtor 2 only	☐ Disputed Type of NONPRIORITY unsecured claim:	
	☐ At least one of the debtors and another	☐ Student loans	
	☐ Check if this claim is for a community debt	☐ Obligations arising out of a separation agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims	
	■ No	Debts to pension or profit-sharing plans, and other similar debts	
	Yes	■ Other. Specify	
		Saloi. Specify	

4:19-bk-16123 Doc#: 1 Filed: 11/15/19 Entered: 11/15/19 16:43:00 Page 34 of 65

Debtor	1 Terry Don Peery	Case number (if known)		
4.35	SOFI Lending Corp.	Last 4 digits of account number	\$79,343.00	
	Nonpriority Creditor's Name Letterman Digital Arts center One Letterman Dr. Building A, Suite 4700 San Francisco, CA 94129	When was the debt incurred?		
	Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply		
	Who incurred the debt? Check one.	Пол		
	■ Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	At least one of the debtors and another	Type of NONPRIORITY unsecured claim:		
	_	☐ Student loans		
	☐ Check if this claim is for a community debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims		
	No	☐ Debts to pension or profit-sharing plans, and other similar debts		
	Yes	Other. Specify business debt		
4.36	State Farm Life Ins Group	Last 4 digits of account number	\$256.00	
	Nonpriority Creditor's Name Commercial Group Life PO Box 2380	When was the debt incurred?		
	Bloomington, IL 61702-2380			
	Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply		
	Who incurred the debt? Check one.	☐ Contingent		
	Debtor 1 only	☐ Unliquidated		
	☐ Debtor 2 only	☐ Disputed		
	☐ Debtor 1 and Debtor 2 only	Type of NONPRIORITY unsecured claim:		
	At least one of the debtors and another	☐ Student loans		
	☐ Check if this claim is for a community debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims		
	No	Debts to pension or profit-sharing plans, and other similar debts		
	Yes	Other. Specify business debt		
4.37	Stericycle	Last 4 digits of account number	\$2,105.00	
	Nonpriority Creditor's Name 4010 Commercial Ave. Northbrook, IL 60062	When was the debt incurred?		
	Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply		
	Who incurred the debt? Check one.	☐ Contingent		
	■ Debtor 1 only	☐ Unliquidated		
	☐ Debtor 2 only	Disputed		
	☐ Debtor 1 and Debtor 2 only	Type of NONPRIORITY unsecured claim:		
	☐ At least one of the debtors and another	☐ Student loans		
	☐ Check if this claim is for a community debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims		
	■ No	\square Debts to pension or profit-sharing plans, and other similar debts		
	Yes	Other. Specify business debt		

4:19-bk-16123 Doc#: 1 Filed: 11/15/19 Entered: 11/15/19 16:43:00 Page 35 of 65

Debto	Terry Don Peery	Case number (if known)	
4.38	Synchrony Bank	Last 4 digits of account number	\$2,500.00
	Nonpriority Creditor's Name Bankruptcy Dept PO Box 965060 Orlando, FL 32896-5060	When was the debt incurred?	
	Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.	Continuest	
	Debtor 1 only	☐ Contingent	
	☐ Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim: ☐ Student loans	
	☐ Check if this claim is for a community debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	Yes	Other. Specify	
4.39	Synchrony Bank	Last 4 digits of account number 3936	\$2,600.00
	Nonpriority Creditor's Name Bankruptcy Dept PO Box 965060	When was the debt incurred?	
	Orlando, FL 32896-5060 Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	■ Debtor 1 only	Contingent	
	Debtor 2 only	☐ Unliquidated	
	Debtor 1 and Debtor 2 only	Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community debt	☐ Student loans	
	Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	No	Debts to pension or profit-sharing plans, and other similar debts	
	Yes	Other. Specify	
4.40	US Bank Equipment Finance Nonpriority Creditor's Name	Last 4 digits of account number	\$748.00
	P.O. Box 790448 Saint Louis, MO 63179-0448	When was the debt incurred?	
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	■ Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	Debtor 1 and Debtor 2 only	Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	_	☐ Student loans	
	☐ Check if this claim is for a community debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	Yes	Other. Specify business debt	

4:19-bk-16123 Doc#: 1 Filed: 11/15/19 Entered: 11/15/19 16:43:00 Page 36 of 65

Debtor	1 Terry Don Peery	Case number (if known)	
4.41	WatchGuard Nonpriority Creditor's Name	Last 4 digits of account number	\$801.00
	1624 Franklin St. Ste 501	When was the debt incurred?	
-	Oakland, CA 94612 Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.	☐ Contingent	
	Debtor 1 only	☐ Unliquidated	
	☐ Debtor 2 only	Disputed	
	☐ Debtor 1 and Debtor 2 only	Type of NONPRIORITY unsecured claim:	
	☐ At least one of the debtors and another	☐ Student loans	
	☐ Check if this claim is for a community debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	Yes	Other. Specify business debt	
4.42	Windstream Communications	Last 4 digits of account number	\$1,185.00
	Nonpriority Creditor's Name attn: Financial Services 1720 Galleria Blvd	When was the debt incurred?	
-	Charlotte, NC 28270 Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.	☐ Contingent	
	Debtor 1 only	☐ Unliquidated	
	Debtor 2 only	Disputed	
	Debtor 1 and Debtor 2 only	Type of NONPRIORITY unsecured claim:	
	At least one of the debtors and another	☐ Student loans	
	☐ Check if this claim is for a community debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	Debts to pension or profit-sharing plans, and other similar debts	
	Yes	■ Other. Specify business debt	
4.43	WPS/Tricare	Last 4 digits of account number	\$35.00
	Nonpriority Creditor's Name		
	PO Box 8967 Madison, WI 53708-8967	When was the debt incurred?	
-	Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.	☐ Contingent	
	■ Debtor 1 only	☐ Unliquidated	
	☐ Debtor 2 only	☐ Disputed	
	☐ Debtor 1 and Debtor 2 only	Type of NONPRIORITY unsecured claim:	
	lacksquare At least one of the debtors and another	☐ Student loans	
	☐ Check if this claim is for a community debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	Yes	Other. Specify business debt	
Part 3:	List Others to Be Notified About a Debt	That You Already Listed	
trying more t	to collect from you for a debt you owe to someon	ut your bankruptcy, for a debt that you already listed in Parts 1 or 2. For example, if a c e else, list the original creditor in Parts 1 or 2, then list the collection agency here. Sin ed in Parts 1 or 2, list the additional creditors here. If you do not have additional perso age.	nilarly, if you have
		which entry in Part 1 or Part 2 did you list the original creditor?	
		ne 4.37 of (Check one):	
	x 2929 rillo, CA 93011-2929	■ Part 2: Creditors with Nonpriority Unsecured Claim	S

Official Form 106 E/F

4:19-bk-16123 Doc#: 1 Filed: 11/15/19 Entered: 11/15/19 16:43:00 Page 37 of 65

Debtor 1 Terry Don Peery		Case number (if known)
	Last 4 digits of account number	
Name and Address Brown & Joseph, Ltd	On which entry in Part 1 or Part 2 or Line 4.42 of (Check one):	did you list the original creditor? Part 1: Creditors with Priority Unsecured Claims
P.O. Box 59838 Schaumburg, IL 60159		Part 2: Creditors with Nonpriority Unsecured Claims
Condumbary, IE 00100	Last 4 digits of account number	

Part 4: Add the Amounts for Each Type of Unsecured Claim

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. §159. Add the amounts for each type of unsecured claim.

				Total Claim
	6a.	Domestic support obligations	6a.	\$ 0.00
otal claims rom Part 1	6b.	Taxes and certain other debts you owe the government	6b.	\$ 114,077.00
	6c.	Claims for death or personal injury while you were intoxicated	6c.	\$ 0.00
	6d.	Other. Add all other priority unsecured claims. Write that amount here.	6d.	\$ 0.00
	6e.	Total Priority. Add lines 6a through 6d.	6e.	\$ 114,077.00
				Total Claim
	6f.	Student loans	6f.	\$ 140,200.00
otal claims rom Part 2	6g.	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	6g.	\$ 0.00
	6h.	Debts to pension or profit-sharing plans, and other similar debts	6h.	\$ 0.00
	6i.	Other. Add all other nonpriority unsecured claims. Write that amount here.	6i.	\$ 792,560.00
	6j.	Total Nonpriority. Add lines 6f through 6i.	6j.	\$ 932,760.00

Fill in this infor	mation to identify your	case:				
Debtor 1 Terry Don Peery						
	First Name	Middle Name	Last Name			
Debtor 2						
(Spouse if, filing)	First Name	Middle Name	Last Name			
United States Bankruptcy Court for the:		EASTERN DISTRICT O	F ARKANSAS			
Case number						
(if known)						

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
 - ☐ No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
 - Yes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

Person or company with whom you have the contract or lease Name, Number, Street, City, State and ZIP Code

State what the contract or lease is for

2.1 Genuine Parts Co. Legal Dept. 2999 Wildwood Parkway Atlanta, GA 30339 lease on commercial property @ 1101 N. James, Jacksonville AR

4:19-bk-16123 Doc#: 1 Filed: 11/15/19 Entered: 11/15/19 16:43:00 Page 39 of 65

Fill in this is	nformation to identify your	2222			
		case.			
Debtor 1	Terry Don Peery First Name	Middle Name	Last Name		
Debtor 2					
(Spouse if, filing)	First Name	Middle Name	Last Name		
United State	s Bankruptcy Court for the:	EASTERN DISTRICT C	F ARKANSAS		
Case numbe	er				
(if known)					Check if this is an amended filing
					amended ming
	Form 106H				
<u>Schedu</u>	ıle H: Your Cod	ebtors			12/15
your name a	nd case number (if known but have any codebtors? (If). Answer every question		to this page. On the top of any A e as a codebtor.	ndulional Fages, Wille
^	,	,			
■ No □ Yes					
	n the last 8 years, have yo California, Idaho, Louisiana			ry? (Community property states and Wisconsin.)	nd territories include
		,		migrori, and microsoftenin,	
	So to line 3.		a cold constant that the a		
⊔ Yes. i	Did your spouse, former spo	use, or legal equivalent liv	e with you at the time?		
in line 2 Form 10	again as a codebtor only	if that person is a guarar	ntor or cosigner. Make	r if your spouse is filing with you sure you have listed the credito 06G). Use Schedule D, Schedule	r on Schedule D (Offici
	olumn 1: Your codebtor me, Number, Street, City, State and Z	IP Code		Column 2: The creditor to w Check all schedules that app	
3.1				☐ Schedule D, line	
	ame			Schedule E/F, line	
				☐ Schedule G, line	
Nu	ımber Street			_	
Cit	ty	State	ZIP Code		
3.2				☐ Schedule D, line	
	ame			□ Schedule E, line	
				☐ Schedule G, line	
Nu	ımber Street			_	
Cit		State	ZIP Code		

Schedule H: Your Codebtors

Fill in this information to identify your case:	
Debtor 1 Terry Don Peery	
Debtor 2 (Spouse, if filing)	
United States Bankruptcy Court for the: EASTERN DISTRICT OF ARKANSAS	
Case number (If known)	Check if this is: ☐ An amended filing ☐ A supplement showing postpetition chapter
Official Form 106I	13 income as of the following date: MM / DD/ YYYY

Schedule I: Your Income

12/15

Be as complete and accurate as possible. If two married people are filing together (Debtor 1 and Debtor 2), both are equally responsible for supplying correct information. If you are married and not filing jointly, and your spouse is living with you, include information about your spouse. If you are separated and your spouse is not filing with you, do not include information about your spouse. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Par	Describe Employment			
1.	Fill in your employment information.		Debtor 1	Debtor 2 or non-filling spouse
	If you have more than one job,	Fundament status	Employed	☐ Employed
	attach a separate page with information about additional	Employment status	☐ Not employed	☐ Not employed
	employers.	Occupation	Dr.	
	Include part-time, seasonal, or self-employed work.	Employer's name	Conway Regional Medical Center	
	Occupation may include student or homemaker, if it applies.	Employer's address	P.O. Box 10610 Conway, AR 72034	
		How long employed the	nere? <u>1.5 yr</u>	
Par	Give Details About Mor	othly Income		

Estimate monthly income as of the date you file this form. If you have nothing to report for any line, write \$0 in the space. Include your non-filing spouse unless you are separated.

If you or your non-filing spouse have more than one employer, combine the information for all employers for that person on the lines below. If you need more space, attach a separate sheet to this form.

List monthly gross wages, salary, and commissions (before all payroll deductions). If not paid monthly, calculate what the monthly wage would be.

- 3. Estimate and list monthly overtime pay.
- 4. Calculate gross Income. Add line 2 + line 3.

		For Debtor 1		otor 2 or ng spouse
2.	\$	36,900.00	\$	N/A
3.	+\$	0.00	+\$	N/A
4.	\$	36,900.00	\$	N/A

Official Form 106l Schedule I: Your Income page 1

Deb	tor 1	Terry Don Peery		Cas	se number (<i>if kn</i>	own)				
				F	or Debtor 1		For	Debtor	2 or	
								filing s	•	
	Cop	y line 4 here	4.	\$	36,900	.00	\$		N/	Α_
5.	List	all payroll deductions:								
	5a.	Tax, Medicare, and Social Security deductions	5a.	. \$	13,500	00	\$		N/	Δ
	5b.	Mandatory contributions for retirement plans	5b.			.00	\$		N/	
	5c.	Voluntary contributions for retirement plans	5c.	. \$	2,519		\$		N/	A
	5d.	Required repayments of retirement fund loans	5d.		0	.00	\$		N/	Α
	5e.	Insurance	5e.			.00	\$		N/	
	5f.	Domestic support obligations	5f.			.00	\$		N/	
	5g.	Union dues	5g.			.00	—		N/	
	5h.	Other deductions. Specify:	5h.			.00			N/	
6.		the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.	6.	\$	16,104		\$		N/	
7.	Calc	rulate total monthly take-home pay. Subtract line 6 from line 4.	7.	\$	20,796	.00	\$		N/	<u>A</u>
8.	List 8a.	all other income regularly received: Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total								
		monthly net income.	8a.	. \$	0	.00	\$		N/	Α
	8b.	Interest and dividends	8b.	. \$	0	.00	\$		N/	
	8c.	Family support payments that you, a non-filing spouse, or a depende regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.	ent 8c.	. \$	0	.00	\$		N/	A
	8d.	Unemployment compensation	8d.	. \$.00	\$		N/	
	8e.	Social Security	8e.	. \$	0	.00	\$		N/	Α
	8f. 8g.	Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistant that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify: Pension or retirement income	nce 8f. 8g.			.00 .00	\$ \$		N/ N/	
	8h.	Other monthly income. Specify: AR Emergency Physician	8h.		12,000				N/	
	011.	AK Emergency i hysician		Ψ	12,000	.00	_		11/	<u>^</u>
9.	Add	all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	9.	\$_	12,000	.00	\$		N	I/A
10.	Calc	ulate monthly income. Add line 7 + line 9.	10.	\$	32,796.00	+ \$		N/A	= \$	32,796.00
	Add	the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.			,					
11.	Inclu othe	e all other regular contributions to the expenses that you list in Schedulde contributions from an unmarried partner, members of your household, your friends or relatives. ot include any amounts already included in lines 2-10 or amounts that are notify:	our depe				,	Schedul 11.		0.00
12.		the amount in the last column of line 10 to the amount in line 11. The ethat amount on the Summary of Schedules and Statistical Summary of Celes				,		. 12.	\$	32,796.00
13.	Do v	ou expect an increase or decrease within the year after you file this for	rm?							bined hly income
	,	No.								
	$\overline{}$	Ves Explain:								

Official Form 106l Schedule I: Your Income page 2

Fill	in this information to identify your case:					
Deb	tor 1 Terry Don Peery		Ch	eck if thi	s is:	
					ended filing	
	tor 2					ving postpetition chapter the following date:
`'	, 3,	NOAG				
Unit	ed States Bankruptcy Court for the: EASTERN DISTRICT OF ARKA	NSAS		MM / I	DD / YYYY	
	e number nown)					
Of	ficial Form 106J					
Sc	chedule J: Your Expenses					12/15
info	as complete and accurate as possible. If two married people a brmation. If more space is needed, attach another sheet to this nber (if known). Answer every question.	are filing together, be s form. On the top of	oth are e fany add	qually re itional p	esponsible fo ages, write y	or supplying correct your name and case
Par						
1.	Is this a joint case?					
	■ No. Go to line 2. ☐ Yes. Does Debtor 2 live in a separate household?					
	☐ Yes. Debtor 2 must file Official Form 106J-2, Expense	es for Separate House	ehold of D	ebtor 2.		
2.	Do you have dependents? ■ No					
	Do not list Debtor 1 and Debtor 2. Fill out this information for each dependent	Dependent's relation Debtor 1 or Debtor		De ag	pendent's e	Does dependent live with you?
	Do not state the					□ No
	dependents names.					☐ Yes
						□ No □ Yes
		-				□ No
						☐ Yes
						□ No
3.	Do your expenses include					☐ Yes
Э.	expenses of people other than					
	yourself and your dependents?					
	2: Estimate Your Ongoing Monthly Expenses					
exp	imate your expenses as of your bankruptcy filing date unless enses as of a date after the bankruptcy is filed. If this is a sup licable date.					
	ude expenses paid for with non-cash government assistance value of such assistance and have included it on Schedule I:					
(Off	iicial Form 106I.)				Your expe	enses
4.	The rental or home ownership expenses for your residence. payments and any rent for the ground or lot.	Include first mortgage	e 4.	\$		1,200.00
	If not included in line 4:					
			4~	¢		0.00
	4a. Real estate taxes4b. Property, homeowner's, or renter's insurance		4a. 4b.	:		0.00 0.00
	4c. Home maintenance, repair, and upkeep expenses		4c.	:		275.00
	4d. Homeowner's association or condominium dues		4d.	\$		0.00
5.	Additional mortgage payments for your residence, such as h	ome equity loans	5.	\$		0.00

Debtor 1	Terry Don Peery	Case num	ber (if known)	
6. Uti	lities:			
6. Uti		6a.	\$	300.00
6b.		6b.		80.00
6c.		6c.	·	200.00
6d.	Other Specify: Natural Cos	6d.		40.00
ou.	cable/internet	ou.	\$	300.00
7 Fa.			·	
	od and housekeeping supplies	7.	·	500.00
_	Idcare and children's education costs	8.	\$	0.00
	thing, laundry, and dry cleaning	9.		130.00
	sonal care products and services	10.	·	25.00
	dical and dental expenses	11.	\$	150.00
	nsportation. Include gas, maintenance, bus or train fare.	12.	\$	400.00
	not include car payments. sertainment, clubs, recreation, newspapers, magazines, and books	13.		
		14.		400.00
	aritable contributions and religious donations	14.	Ф	0.00
	urance. not include insurance deducted from your pay or included in lines 4 or 20.			
	not include insurance deducted from your pay or included in lines 4 or 20.	15a.	¢	300.00
	o. Health insurance	15a. 15b.		
			·	150.00
	. Vehicle insurance	15c.		220.00
	I. Other insurance. Specify:	15d.	Φ	0.00
	tes. Do not include taxes deducted from your pay or included in lines 4 or 20.	40	¢.	0.00
	ecify:	16.	Φ	0.00
	tallment or lease payments:	170	¢	250.00
	. Car payments for Vehicle 1	17a.		350.00
	Car payments for Vehicle 2	17b.	·	0.00
170	Other. Specify: Synchrony/ furniture	17c.	·	50.00
1/0	I. Other. Specify: IRS secured	17d.		833.00
	IRS 2015 & 2016 income		\$	1,726.00
	DF&A		\$	175.00
	student loans		\$	800.00
	ur payments of alimony, maintenance, and support that you did not report as		•	4 500 00
ded	ducted from your pay on line 5, Schedule I, Your Income (Official Form 106I).	18.		4,500.00
	ner payments you make to support others who do not live with you.		\$	0.00
	ecify:	19.		
	ner real property expenses not included in lines 4 or 5 of this form or on Sch			
	n. Mortgages on other property	20a.	·	0.00
	o. Real estate taxes	20b.		0.00
	. Property, homeowner's, or renter's insurance	20c.		0.00
	I. Maintenance, repair, and upkeep expenses	20d.	·	0.00
206	e. Homeowner's association or condominium dues	20e.	\$	0.00
1. Otł	ner: Specify:	21.	+\$	0.00
2 6-1	oulete vour mentilly expenses			
	culate your monthly expenses		•	40 404 00
	a. Add lines 4 through 21.		\$	13,104.00
	o. Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2		\$	
220	. Add line 22a and 22b. The result is your monthly expenses.		\$	13,104.00
3 C2	culate your monthly net income.			
	a. Copy line 12 (your combined monthly income) from Schedule I.	23a.	\$	32,796.00
	Copy your monthly expenses from line 22c above.	23a. 23b.		13,104.00
231	o. Copy your monthly expenses nominate 220 above.	∠30.		13,104.00
220	:. Subtract your monthly expenses from your monthly income.			
230	The result is your <i>monthly net income</i> .	23c.	\$	19,692.00
	The result is your monthly her mounte.			•
For	you expect an increase or decrease in your expenses within the year after your example, do you expect to finish paying for your car loan within the year or do you expect your diffication to the terms of your mortgage?			e or decrease because of a
	No.			
	Voc Evolain here:			

Fill in this infor	rmation to identify your	case.			
Debtor 1	Terry Don Peery	ouco.			
	First Name	Middle Name	Last Name		
Debtor 2					
(Spouse if, filing)	First Name	Middle Name	Last Name		
United States Ba	ankruptcy Court for the:	EASTERN DISTRICT	OF ARKANSAS		
Case number					
(if known)					☐ Check if this is an amended filing
Official For		n Individua	l Dobtorio Sol	hadulaa	
Declarat	lion About a	n maividua	I Debtor's Sc	nedules	12/15
	I8 U.S.C. §§ 152, 1341, 1 ∣n Below	519, and 35/1.			
Did you pa	ay or agree to pay some	one who is NOT an att	orney to help you fill out b	pankruptcy forms?	
■ No					
☐ Yes.	Name of person				cy Petition Preparer's Notice, Signature (Official Form 119)
	alty of perjury, I declare re true and correct.	that I have read the su	ımmary and schedules file	d with this declaration an	d
X /s/ Tar	ry Don Peery		Χ		
	Don Peery		Signature of	Debtor 2	
	ure of Debtor 1		- 3 • • ·		
Date _	November 15, 2019		Date		

Fill	in this inform	nation to identify you	r case:			
Deb			· ouse.			
Den	IOI I	Terry Don Peery First Name	Middle Name	Last Name		
	tor 2 use if, filing)	First Name	Middle Name	Last Name		
Unite	ed States Bar	hkruptcy Court for the:	EASTERN DISTRICT OF	ARKANSAS		
Case (if kno	e number					Check if this is an mended filing
Sta Be as infor	s complete a mation. If m	of Financial And accurate as possiore space is needed,	attach a separate sheet to	are filing together, both are	ankruptcy equally responsible for sup y additional pages, write yo	
	<u> </u>	a). Answer every questetails About Your Ma	stion. irital Status and Where You	ı Lived Before		
		current marital statu	ıs?			
	☐ Married■ Not married	ried				
2.	During the la	st 3 years, have you	lived anywhere other than	where you live now?		
	■ No □ Yes. List	t all of the places you I	ived in the last 3 years. Do n	ot include where you live nov	ν.	
	Debtor 1 Pri	or Address:	Dates Debtor 1 lived there	Debtor 2 Prior Ad	dress:	Dates Debtor 2 lived there
					nity property state or territor ico, Texas, Washington and V	
	■ No □ Yes. Ma	ke sure you fill out <i>Scl</i>	nedule H: Your Codebtors (O	fficial Form 106H).		
Part	Explain	n the Sources of You	r Income			
	Fill in the tota	I amount of income yo	nployment or from operating u received from all jobs and a have income that you receive	all businesses, including part		ndar years?
	□ No ■ Yes. Fill	in the details.				
			Debtor 1		Debtor 2	
			Sources of income Check all that apply.	Gross income (before deductions and exclusions)	Sources of income Check all that apply.	Gross income (before deductions and exclusions)
		of current year until d for bankruptcy:	■ Wages, commissions, bonuses, tips	\$100,000.00	☐ Wages, commissions, bonuses, tips	
			☐ Operating a business		☐ Operating a business	

Official Form 107

4:19-bk-16123 Doc#: 1 Filed: 11/15/19 Entered: 11/15/19 16:43:00 Page 46 of 65

De	ebtor 1 Te	rry Don Peery		Case number (if known)					
			Debtor 1		Debte	or 2			
			Sources of income	Gross income		ces of income	Gross income		
			Check all that apply.	(before deductions exclusions)		k all that apply.	(before deductions and exclusions)		
	or last caler anuary 1 to	ndar year: December 31, 2018	☐ Wages, commissions, bonuses, tips	\$318,00		ages, commissions, ses, tips	,		
			Operating a business		□ O _F	perating a business			
		dar year before that December 31, 2017				ages, commissions, ses, tips	,		
			Operating a business		□ O _F	perating a business			
	List each	, ,	If you are filing a joint case and gincome from each source separ	•	•		iod ander Debior 1.		
			Debtor 1		Debte				
			Sources of income Describe below.	Gross income fro each source (before deductions exclusions)	Desci	ces of income ribe below.	Gross income (before deductions and exclusions)		
Pa	rt 3: Lis	t Certain Payments `	You Made Before You Filed for	r Bankruptcy					
6.	■ No.	Neither Debtor 1 n individual primarily for During the 90 days No. Go to liming the Yes List below paid that not incluse to adjust the Subject to adjust the Polymon During the 90 days No. Go to liming the Yes Control of	ow each creditor to whom you patt creditor. Do not include payment to an attorney for ment on 4/01/22 and every 3 years 2 or both have primarily considerations you filed for bankruptcy, one 7.	sumer debts. Consumold purpose." did you pay any credited at total of \$6,825* conts for domestic supporthis bankruptcy case. The area after that for cases sumer debts. Consumer debts.	or a total of \$6,8 or more in one of ort obligations, filed on or after or a total of \$60	325* or more? or more payments ar such as child support the date of adjustm 0 or more?	nd the total amount you ort and alimony. Also, do nent.		
		include	ow each creditor to whom you pa payments for domestic support ney for this bankruptcy case.						
	Creditor	's Name and Addres	s Dates of paym			unt you Was thi till owe	is payment for		
	P.O. Bo	s Mortgage x 18001 ourg, MS 39404	monthly payr	ments \$3,600).00 \$160,		lit Card n Repayment oliers or vendors		

Terry Don Peery Debtor 1 Case number (if known) Within 1 year before you filed for bankruptcy, did you make a payment on a debt you owed anyone who was an insider? Insiders include your relatives; any general partners; relatives of any general partners; partnerships of which you are a general partner; corporations of which you are an officer, director, person in control, or owner of 20% or more of their voting securities; and any managing agent, including one for a business you operate as a sole proprietor. 11 U.S.C. § 101. Include payments for domestic support obligations, such as child support and alimony. ☐ No Yes. List all payments to an insider. **Insider's Name and Address** Dates of payment Total amount Amount you Reason for this payment still owe paid Jackie Peery monthly \$13,500.00 \$0.00 Alimony 9 Newberry Lane Jacksonville, AR 72076 Within 1 year before you filed for bankruptcy, did you make any payments or transfer any property on account of a debt that benefited an insider? Include payments on debts guaranteed or cosigned by an insider. Yes. List all payments to an insider **Insider's Name and Address Dates of payment Total amount** Amount you Reason for this payment paid still owe Include creditor's name Part 4: Identify Legal Actions, Repossessions, and Foreclosures Within 1 year before you filed for bankruptcy, were you a party in any lawsuit, court action, or administrative proceeding? List all such matters, including personal injury cases, small claims actions, divorces, collection suits, paternity actions, support or custody modifications, and contract disputes. Nο Yes. Fill in the details. Case title Nature of the case Court or agency Status of the case Case number 10. Within 1 year before you filed for bankruptcy, was any of your property repossessed, foreclosed, garnished, attached, seized, or levied? Check all that apply and fill in the details below. No. Go to line 11. Yes. Fill in the information below. **Creditor Name and Address Describe the Property** Date Value of the property Explain what happened 11. Within 90 days before you filed for bankruptcy, did any creditor, including a bank or financial institution, set off any amounts from your accounts or refuse to make a payment because you owed a debt? Nο Yes. Fill in the details. **Creditor Name and Address** Describe the action the creditor took Date action was **Amount** taken 12. Within 1 year before you filed for bankruptcy, was any of your property in the possession of an assignee for the benefit of creditors, a court-appointed receiver, a custodian, or another official? No

4:19-bk-16123 Doc#: 1 Filed: 11/15/19 Entered: 11/15/19 16:43:00 Page 47 of 65

☐ Yes

4:19-bk-16123 Doc#: 1 Filed: 11/15/19 Entered: 11/15/19 16:43:00 Page 48 of 65 Debtor 1 Terry Don Peery Case number (if known) Part 5: List Certain Gifts and Contributions 13. Within 2 years before you filed for bankruptcy, did you give any gifts with a total value of more than \$600 per person? ☐ Yes. Fill in the details for each gift. Gifts with a total value of more than \$600 Describe the gifts Dates you gave Value the gifts per person Person to Whom You Gave the Gift and Address: 14. Within 2 years before you filed for bankruptcy, did you give any gifts or contributions with a total value of more than \$600 to any charity? Yes. Fill in the details for each gift or contribution. Gifts or contributions to charities that total Describe what you contributed Dates you Value more than \$600 contributed Charity's Name Address (Number, Street, City, State and ZIP Code) Part 6: List Certain Losses 15. Within 1 year before you filed for bankruptcy or since you filed for bankruptcy, did you lose anything because of theft, fire, other disaster, or gambling? No Yes. Fill in the details. Describe the property you lost and Describe any insurance coverage for the loss Date of your Value of property how the loss occurred loss lost Include the amount that insurance has paid. List pending insurance claims on line 33 of Schedule A/B: Property. Part 7: List Certain Payments or Transfers 16. Within 1 year before you filed for bankruptcy, did you or anyone else acting on your behalf pay or transfer any property to anyone you consulted about seeking bankruptcy or preparing a bankruptcy petition? Include any attorneys, bankruptcy petition preparers, or credit counseling agencies for services required in your bankruptcy. ☐ No Yes. Fill in the details. Person Who Was Paid Description and value of any property Date payment Amount of **Address** transferred or transfer was payment **Email or website address** made Person Who Made the Payment, if Not You Knollmeyer Law Office, P.A. filing fee + credit counseling fee + \$2,850.00 2525 John Harden Drive attorney fee Jacksonville, AR 72076 17. Within 1 year before you filed for bankruptcy, did you or anyone else acting on your behalf pay or transfer any property to anyone who promised to help you deal with your creditors or to make payments to your creditors? Do not include any payment or transfer that you listed on line 16.

No

Yes. Fill in the details.

Person Who Was Paid Description and value of any property Date payment Amount of **Address** transferred or transfer was payment made

4:19-bk-16123 Doc#: 1 Filed: 11/15/19 Entered: 11/15/19 16:43:00 Page 49 of 65

Case number (if known)

18.	Within 2 years before you filed for bankruptcy, did you sell, trade, or otherwise transfer any property to anyone, other than property transferred in the ordinary course of your business or financial affairs? Include both outright transfers and transfers made as security (such as the granting of a security interest or mortgage on your property). Do not include gifts and transfers that you have already listed on this statement. No Yes. Fill in the details.							
	Person Who Received Transfer Address Person's relationship to you	Description and property transfer		payn	cribe any property or nents received or debts in exchange	Date transfer was made		
 19. Within 10 years before you filed for bankruptcy, did you transfer any property to a self-settled trust or similar device beneficiary? (These are often called asset-protection devices.) ■ No □ Yes. Fill in the details. 					e of which you are a			
	Name of trust	Description and	value of the pro	operty trai	nsferred	Date Transfer was made		
Par	t 8: List of Certain Financial Accounts, In	struments Safe Denos	it Royes and S	Storage Ur	nite			
۷٠.	Within 1 year before you filed for bankruptcy, were any financial accounts or instruments held in your name, or for your benefit, closed, sold, moved, or transferred? Include checking, savings, money market, or other financial accounts; certificates of deposit; shares in banks, credit unions, brokerage houses, pension funds, cooperatives, associations, and other financial institutions. No Yes. Fill in the details.							
	Name of Financial Institution and Address (Number, Street, City, State and ZIP Code)	Last 4 digits of account number instrument				Last balance before closing or transfer		
	Regions	xxxx-	CXXX- Checking Savings Money Market Brokerage Other			\$0.00		
21.	Do you now have, or did you have within 1 cash, or other valuables?	year before you filed fo	or bankruptcy, a	any safe d	eposit box or other depo	sitory for securities,		
	Yes. Fill in the details.							
	Name of Financial Institution Address (Number, Street, City, State and ZIP Code)	Who else had ac Address (Number, State and ZIP Code)		Describe	e the contents	Do you still have it?		
22.	Have you stored property in a storage unit	or place other than you	ır home within	1 year bef	ore you filed for bankrup	tcy?		
	Yes. Fill in the details.							
	Name of Storage Facility Address (Number, Street, City, State and ZIP Code)	Who else has or to it? Address (Number, State and ZIP Code)		Describe	e the contents	Do you still have it?		

Debtor 1 Terry Don Peery

Debtor 1	Terry Don Peery	Case number (if known)

Par	rt 9: Identify Property You Hold or Control for	Someone Else							
23.	Do you hold or control any property that someofor someone.	one else owns? Include any prope	rty you b	orrowed from, are storing fo	or, or hold in trust				
	No								
	Yes. Fill in the details.								
	Owner's Name Address (Number, Street, City, State and ZIP Code)	Where is the property? (Number, Street, City, State and ZIP Code)	Descril	be the property	Value				
Par	rt 10: Give Details About Environmental Informa	ation							
or	the purpose of Part 10, the following definitions	apply:							
	Environmental law means any federal, state, or toxic substances, wastes, or material into the a regulations controlling the cleanup of these sul	ir, land, soil, surface water, grour							
	Site means any location, facility, or property as to own, operate, or utilize it, including disposal	•	law, who	ether you now own, operate	, or utilize it or used				
	Hazardous material means anything an environ hazardous material, pollutant, contaminant, or		s waste,	hazardous substance, toxic	substance,				
Rep	port all notices, releases, and proceedings that ye	ou know about, regardless of whe	n they o	ccurred.					
24.	Has any governmental unit notified you that you	u may be liable or potentially liable	e under o	or in violation of an environr	mental law?				
	■ No □ Yes. Fill in the details.								
	Name of site Address (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State and ZIP Code)		vironmental law, if you ow it	Date of notice				
25.	Have you notified any governmental unit of any release of hazardous material?								
	■ No □ Yes. Fill in the details.								
	Name of site Address (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State an ZIP Code)	_	vironmental law, if you ow it	Date of notice				
26.	Have you been a party in any judicial or adminis	strative proceeding under any env	/ironmen	tal law? Include settlements	and orders.				
	■ No □ Yes. Fill in the details.								
	Case Title Case Number	Court or agency Name Address (Number, Street, City, State and ZIP Code)	Nature	of the case	Status of the case				
Par	rt 11: Give Details About Your Business or Con	·							
27.	Within 4 years before you filed for bankruptcy, did you own a business or have any of the following connections to any business?								
	☐ A sole proprietor or self-employed in a trade, profession, or other activity, either full-time or part-time								
	☐ A member of a limited liability company (LLC) or limited liability partnership (LLP)								
	☐ A partner in a partnership								
	☐ An officer, director, or managing execut	tive of a corporation							
	☐ An owner of at least 5% of the voting or equity securities of a corporation								

Official Form 107

4:19-bk-16123 Doc#: 1 Filed: 11/15/19 Entered: 11/15/19 16:43:00 Page 51 of 65 **Terry Don Peery** Debtor 1 Case number (if known) ■ No. None of the above applies. Go to Part 12. Yes. Check all that apply above and fill in the details below for each business. Describe the nature of the business **Employer Identification number Business Name Address** Do not include Social Security number or ITIN. (Number, Street, City, State and ZIP Code) Name of accountant or bookkeeper **Dates business existed** AR Quick Care PA EIN: 27-2358641 medical care From-To 7/2013 - 8/2018 Within 2 years before you filed for bankruptcy, did you give a financial statement to anyone about your business? Include all financial institutions, creditors, or other parties. Yes. Fill in the details below. Name **Date Issued Address** (Number, Street, City, State and ZIP Code) **Regions Bank** 2015 or 2016 Part 12: Sign Below I have read the answers on this Statement of Financial Affairs and any attachments, and I declare under penalty of perjury that the answers are true and correct. I understand that making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. /s/ Terry Don Peery Signature of Debtor 2 **Terry Don Peery** Signature of Debtor 1 Date November 15, 2019 Date

Did you attach additional pages to Your Statement of Financial Affairs for Individuals Filing for Bankruptcy (Official Form 107)?

☐ Yes. Name of Person . Attach the Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119).

Did you pay or agree to pay someone who is not an attorney to help you fill out bankruptcy forms?

■ No
□ Yes

Statement of Intention for Individuals Filing Under Chapter 7 12/15 If you are an individual filing under chapter 7, you must fill out this form if: creditors have claims secured by your property, or	Fill in this infor	mation to identify your	case:			
Debtor 2 (Spouse if, filing) First Name Middle Name Last Name United States Bankruptcy Court for the: EASTERN DISTRICT OF ARKANSAS Case number (If known) Check if this is an amended filing Official Form 108 Statement of Intention for Individuals Filing Under Chapter 7 12/15 If you are an individual filing under chapter 7, you must fill out this form if: Creditors have claims secured by your property, or	Debtor 1					
United States Bankruptcy Court for the: EASTERN DISTRICT OF ARKANSAS Case number (if known) Check if this is an amended filing Official Form 108 Statement of Intention for Individuals Filing Under Chapter 7 12/15 If you are an individual filing under chapter 7, you must fill out this form if: creditors have claims secured by your property, or		First Name	Middle Name	Last Name		
Case number (if known) Check if this is an amended filing Official Form 108 Statement of Intention for Individuals Filing Under Chapter 7 12/19 If you are an individual filing under chapter 7, you must fill out this form if: creditors have claims secured by your property, or		First Name	Middle Name	Last Name		
Official Form 108 Statement of Intention for Individuals Filing Under Chapter 7 12/19 If you are an individual filing under chapter 7, you must fill out this form if: creditors have claims secured by your property, or	United States Ba	ankruptcy Court for the:	EASTERN DISTRICT C	F ARKANSAS		
Official Form 108	_					Charle if this is an
Statement of Intention for Individuals Filing Under Chapter 7 12/15 If you are an individual filing under chapter 7, you must fill out this form if: creditors have claims secured by your property, or	(ii kilowii)					
If you are an individual filing under chapter 7, you must fill out this form if: creditors have claims secured by your property, or	Official Fo	orm 108				
creditors have claims secured by your property, or	Stateme	nt of Intentio	n for Individu	als Filing Unde	r Chapter 7	12/15
creditors have claims secured by your property, or	If you are an ind	lividual filing under cha	untor 7 you must fill out	this form if:		
_		•		uns form in.		
	_	• • • • • • • • • • • • • • • • • • • •	,			

If two married people are filing together in a joint case, both are equally responsible for supplying correct information. Both debtors must sign and date the form.

whichever is earlier, unless the court extends the time for cause. You must also send copies to the creditors and lessors you list

Be as complete and accurate as possible. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known).

Part 1: List Your Creditors Who Have Secured Claims

on the form

1. For any creditors that you listed in Part 1 of Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D), fill in the information below.

Identify the creditor and the property that is collateral	What do you intend to do with the property that secures a debt?	at Did you claim the property as exempt on Schedule C?	
Creditor's Regions	■ Surrender the property.	No	
name:	☐ Retain the property and redeem it.		
Description of equipment - corporation owns	☐ Retain the property and enter into a Reaffirmation Agreement.	☐ Yes	
property securing debt:	☐ Retain the property and [explain]:		
Creditor's Regions	■ Surrender the property.	■ No	
name:	Retain the property and redeem it.	Пу	
Description of equipment - corporation owns	☐ Retain the property and enter into a Reaffirmation Agreement.	☐ Yes	
property securing debt:	☐ Retain the property and [explain]:		
Creditor's Regions Mortgage	☐ Surrender the property.	■ No	
name:	☐ Retain the property and redeem it.	_	
Description of 515 Cheshier Court Jacksonville, AR 72076 Pulaski	Retain the property and enter into a Reaffirmation Agreement.	☐ Yes	
County	☐ Retain the property and [explain]:		

Official Form 108

Statement of Intention for Individuals Filing Under Chapter 7

4:19-bk-16123 Doc#: 1 Filed: 11/15/19 Entered: 11/15/19 16:43:00 Page 53 of 65

Debtor 1 Terry Don Peery			n Peery	Case number (if known)				
\$	securing d	ebt:						
	Creditor's	State	Farm Bank	☐ Surrender the property. ☐ Retain the property and redeem it.	□ No			
F	Description property securing d	mil	07 Ford Explorer 100,000+ les	 ■ Retain the property and enter into a Reaffirmation Agreement. □ Retain the property and [explain]: 	■ Yes			
For in tl	any unex ne inform	pired per ation bel	ow. Do not list real estate leases	ses sted in Schedule G: Executory Contracts and Unexp s. Unexpired leases are leases that are still in effect; e if the trustee does not assume it. 11 U.S.C. § 365(p	the lease period has not yet ended.			
De	scribe you	ır unexp	ired personal property leases		Will the lease be assumed?			
Les	ssor's nam	e:	Genuine Parts Co.		■ No			
					☐ Yes			
Pro	scription o			rty @ 1101 N. James, Jacksonville AR				
Unc pro	ler penalt	is subje	ury, I declare that I have indicated to an unexpired lease.	d my intention about any property of my estate that	secures a debt and any personal			
X		y Don F		X Signature of Debtor 2				
	Terry Don Peery Signature of Debtor 1			Signature of Debtor 2				
	Date	Nover	mber 15, 2019	Date				

Fill in this information to identify your case:			nly as directed in this form ar	nd in Form
Debtor 1 Terry Don Peery		122A-1Supp:		
Debtor 2 (Spouse, if filing)		■ 1. There is	no presumption of abuse	
United States Bankruptcy Court for the: Eastern District o	f Arkansas		ulation to determine if a presu	•
Case number			vill be made under <i>Chapter 7</i> <i>ion</i> (Official Form 122A-2).	Means Test
(if known)			ns Test does not apply now be military service but it could a	
		☐ Check if the	nis is an amended filing	
Official Form 122A - 1				
Chapter 7 Statement of Your Cu	rrent Monthly	/ Income		10/19
Be as complete and accurate as possible. If two married people a separate sheet to this form. Include the line number to which the number (if known). If you believe that you are exempted from a primilitary service, complete and file Statement of Exemption from Part 1: Calculate Your Current Monthly Income	additional information ap	olies. On the top of any a use you do not have pri	additional pages, write your nar marily consumer debts or beca	ne and case use of qualifying
1. What is your marital and filing status? Check one of	only.			
☐ Not married. Fill out Column A, lines 2-11.	•			
☐ Married and your spouse is filing with you. Fill o	out both Columns A and	B, lines 2-11.		
☐ Married and your spouse is NOT filing with you.	. You and your spouse	are:		
☐ Living in the same household and are not leg	ally separated. Fill out	both Columns A and I	3, lines 2-11.	
☐ Living separately or are legally separated. Fill penalty of perjury that you and your spouse are living apart for reasons that do not include evading	legally separated under	nonbankruptcy law the	at applies or that you and you	
Fill in the average monthly income that you received from all 1 101(10A). For example, if you are filing on September 15, the 6-m 6 months, add the income for all 6 months and divide the total by the same rental property, put the income from that property in one	onth period would be March 6. Fill in the result. Do not in	1 through August 31. If the clude any income amount	ne amount of your monthly income than once. For example, if	e varied during the
		Column A Debtor 1	Column B Debtor 2 or non-filing spouse	
Your gross wages, salary, tips, bonuses, overtime, all payroll deductions).	, and commissions (be	efore \$	\$	
Alimony and maintenance payments. Do not include Column B is filled in.	e payments from a spou	se if \$	\$	
4. All amounts from any source which are regularly p of you or your dependents, including child suppor from an unmarried partner, members of your househol and roommates. Include regular contributions from a s filled in. Do not include payments you listed on line 3.	t. Include regular contribled, your dependents, pa	outions rents,	\$	
5. Net income from operating a business, profession	•			
	Debtor 1			
Gross receipts (before all deductions)	\$			
Ordinary and necessary operating expenses	· —— •	here -> \$	\$	
Net monthly income from a business, profession, or fa	ırııı \$	—————————————————————————————————————	Ψ	
6. Net income from rental and other real property	Debtor 1			
Gross receipts (before all deductions)	\$			
Ordinary and necessary operating expenses	-\$			
Net monthly income from rental or other real property	\$ Copy	here -> \$	\$	
7. Interest, dividends, and royalties		\$	\$	

Official Form 122A-1

Case number (if known)

					_
			Column A Debtor 1	Column B Debtor 2 or non-filing spouse	
8.	Unemployment compensation		\$	\$	
	Do not enter the amount if you contend that the amount received was a bene under the Social Security Act. Instead, list it here: For you \$				
	For you \$ For your spouse \$				
9.	Pension or retirement income. Do not include any amount received that was benefit under the Social Security Act. Also, except as stated in the next sented on the include any compensation, pension, pay, annuity, or allowance paid by United States Government in connection with a disability, combat-related injuried.	ns a ence, y the			
40	disability, or death of a member of the uniformed services. If you received an retired pay paid under chapter 61 of title 10, then include that pay only to the that it does not exceed the amount of retired pay to which you would otherwise entitled if retired under any provision of title 10 other than chapter 61 of that the contract of the contract	\$	\$		
10.	Income from all other sources not listed above. Specify the source and ar Do not include any benefits received under the Social Security Act; payments received as a victim of a war crime, a crime against humanity, or internationa domestic terrorism; or compensation, pension, pay, annuity, or allowance pai the United States Government in connection with a disability, combat-related or disability, or death of a member of the uniformed services. If necessary, lis sources on a separate page and put the total below.	s Il or d by injury			
			\$	\$	
			\$	\$	
	Total amounts from separate pages, if any.	_ +	\$	\$	
11.	Calculate your total current monthly income. Add lines 2 through 10 for each column. Then add the total for Column A to the total for Column B.	\$	+ \$	= \$	
				Total assessed was able	
				Total current monthly income	,
Part	2: Determine Whether the Means Test Applies to You				
12.	Calculate your current monthly income for the year. Follow these steps:				
	12a. Copy your total current monthly income from line 11		Copy line 11	here=> \$	-
	Multiply by 12 (the number of months in a year)			x 12	_
	12b. The result is your annual income for this part of the form			12b. \$	-
13.	Calculate the median family income that applies to you. Follow these step	os:			_
	Fill in the state in which you live.				
	Fill in the number of people in your household.				
	Fill in the median family income for your state and size of household.			13. \$	
	To find a list of applicable median income amounts, go online using the link s for this form. This list may also be available at the bankruptcy clerk's office.	pecified	d in the separate instr	· · · · · · · · · · · · · · · · · · ·	
14.	How do the lines compare?				
	14a. Line 12b is less than or equal to line 13. On the top of page 1, ch Go to Part 3.				
	14b. Line 12b is more than line 13. On the top of page 1, check box 2 Go to Part 3 and fill out Form 122A-2.	t, The p	resumption of abuse i	s determined by Form 122A-2.	
Part	3: Sign Below				
	By signing here, I declare under penalty of perjury that the information o	n this s	tatement and in any a	ttachments is true and correct.	
	X /s/ Terry Don Peery				
	Terry Don Peery Signature of Debtor 1				
	Date November 15, 2019 MM / DD / YYYY				

Official Form 122A-1

Terry Don Peery

Debtor 1

4:19-bk-16123 Doc#: 1 Filed: 11/15/19 Entered: 11/15/19 16:43:00 Page 56 of 65

Debtor 1	Terry Don Peery	Case number (if known)	
	If you checked line 14a, do NOT fill out or file Form 122A-2.		
	If you checked line 14b, fill out Form 122A-2 and file it with this form.		

Filli	in this in	orma	ation to identify you	r case:		
Deb	tor 1	Te	erry Don Peery			
	tor 2 ouse, if fili	ng)				
Unit	ed States	Bank	cruptcy Court for the:	Eastern District of Arkansas		
	e number					☐ Check if this is an amended filing
	nown)					and the state and amended mining
Off	icial F	orı	<u>m 122A - 1S</u>	upp		
Sta	ateme	nt	of Exemption	on from Presumption of	of Ab	ouse Under § 707(b)(2) 12/1
exen exclu	npted from usions in ired by 1	m a p this I U.S	resumption of abus	e. Be as complete and accurate as pos- only one of you, the other person sho	sible. If	ome (Official Form 122A-1), if you believe that you are two married people are filing together, and any of the aplete a separate Form 122A-1 If you believe that this is
					11 11 0	C. § 101(8) as "incurred by an individual primarily for a
1.	personal	, fam		ose." Make sure that your answer is consi		th the answer you gave at line 16 of the <i>Voluntary Petition</i>
			Form 122A-1; on the		There is	no presumption of abuse, and sign Part 3. Then submit this
	☐ Yes.		-	0 1 OIIII 1227(1.		
Part	2: D	etern	nine Whether Militar	y Service Provisions Apply to You		
2.			,	fined in 38 U.S.C. § 3741(1))?		
	□ No.			while you were on active duty or while yo	II WATA T	performing a homeland defense activity?
		•	.S.C. § 101(d)(1); 32 l		u weie p	benonning a nomeratio detense activity:
		No.	Go to line 3.	. ,		
	ο,	Yes.		on the top of page 1 of that form, check be ent with the signed Form 122A-1.	ox 1, <i>Th</i>	nere is no presumption of abuse, and sign Part 3. Then
3.	Are you	or ha	ive you been a Rese	rvist or member of the National Guard?	•	
	□ No.	Con	nplete Form 122A-1. I	Do not submit this supplement.		
	☐ Yes.	We	re you called to active	duty or did you perform a homeland defe	nse acti	vity? 10 U.S.C. § 101(d)(1); 32 U.S.C. § 901(1).
		No.	Complete Form 122	A-1. Do not submit this supplement.		
		Yes.	Check any one of th	e following categories that applies:		
			I was called to active 90 days and remain	ve duty after September 11, 2001, for at on active duty.	least	If you checked one of the categories to the left, go to Form 122A-1. On the top of page 1 of Form 122A-1, check box 3, <i>The Means Test does not apply now</i> , and sign Part 3.
			90 days and was rel	ve duty after September 11, 2001, for at eased from active duty on	,	Then submit this supplement with the signed Form 122A-1. You are not required to fill out the rest of Official Form 122A-1 during the exclusion period. The <i>exclusion</i> period means the time you are on active duty or are
				nomeland defense activity for at least 9		performing a homeland defense activity, and for 540 days afterward. 11 U.S.C. § 707(b)(2)(D)(ii).
			I performed a home	eland defense activity for at least 90 da		If your exclusion period ends before your case is closed, you may have to file an amended form later.

Official Form 122A-1Supp

__, which is fewer than 540 days before I

Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

This notice is for you if:

You are an individual filing for bankruptcy, and

Your debts are primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of Bankruptcy Code:

Chapter 7 - Liquidation

Chapter 11 - Reorganization

Chapter 12 - Voluntary repayment plan for family farmers or fishermen

Chapter 13 - Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

Chapter 7:	Liquidation	
\$245	filing fee	
\$75	administrative fee	
+ \$15	trustee surcharge	
\$335	total fee	

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their nonexempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

most taxes:

most student loans;

domestic support and property settlement obligations;

most fines, penalties, forfeitures, and criminal restitution obligations; and

certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

fraud or theft:

fraud or defalcation while acting in breach of fiduciary capacity;

intentional injuries that you inflicted; and

death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A–1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A–2).

If your income is above the median for your state, you must file a second form —the *Chapter 7 Means Test Calculation* (Official Form 122A–2). The calculations on the form— sometimes called the *Means Test*—deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

Chapter 11: Reorganization

\$1,167 filing fee

+ \$550 administrative fee \$1,717 total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

Read These Important Warnings

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Chapter 12: Repayment plan for family farmers or fishermen

	\$200	filing fee
+	\$75	administrative fee
	\$275	total fee

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

Chapter 13: Repayment plan for individuals with regular income

	\$235	filing fee
+	\$75	administrative fee
	\$310	total fee

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

domestic support obligations,

most student loans,

certain taxes,

debts for fraud or theft,

debts for fraud or defalcation while acting in a fiduciary capacity,

most criminal fines and restitution obligations,

certain debts that are not listed in your bankruptcy papers,

certain debts for acts that caused death or personal injury, and

certain long-term secured debts.

Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court.

For more information about the documents and their deadlines, go to:

http://www.uscourts.gov/bkforms/bankruptcy.fo

http://www.uscourts.gov/bkforms/bankruptcy_forms.html#procedure.

Bankruptcy crimes have serious consequences

If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury—either orally or in writing—in connection with a bankruptcy case, you may be fined, imprisoned, or both.

All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together—called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days *before* you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from: http://justice.gov/ust/eo/hapcpa/ccde/cc_approved.html.

In Alabama and North Carolina, go to: http://www.uscourts.gov/FederalCourts/Bankruptcy/Bankruptcy/BankruptcyResources/ApprovedCredit AndDebtCounselors.aspx.

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list. 4:19-bk-16123 Doc#: 1 Filed: 11/15/19 Entered: 11/15/19 16:43:00 Page 62 of 65

B2030 (Form 2030) (12/15)

United States Bankruptcy Court Eastern District of Arkansas

In re	Terry Don Peery		Case No.				
		Debtor(s)	Chapter	7			
	DISCLOSURE OF COMPENSATI	ON OF ATTORM	NEY FOR DE	EBTOR(S)			
c	Pursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 2016(b), I certify that I am the attorney for the above named debtor(s) and that compensation paid to me within one year before the filing of the petition in bankruptcy, or agreed to be paid to me, for services rendered or to be rendered on behalf of the debtor(s) in contemplation of or in connection with the bankruptcy case is as follows:						
	For legal services, I have agreed to accept		\$	2,500.00			
	Prior to the filing of this statement I have received			2,500.00			
	Balance Due		\$	0.00			
2. T	he source of the compensation paid to me was:						
	■ Debtor □ Other (specify):						
3. T	he source of compensation to be paid to me is:						
	■ Debtor □ Other (specify):						
4. I	I have not agreed to share the above-disclosed compensation	with any other person un	lless they are mem	bers and associates	of my law firm.		
[☐ I have agreed to share the above-disclosed compensation with a person or persons who are not members or associates of my law firm. A copy of the agreement, together with a list of the names of the people sharing in the compensation is attached.						
5. I	n return for the above-disclosed fee, I have agreed to render leg	al service for all aspects of	of the bankruptcy c	ease, including:			
b c	a. Analysis of the debtor's financial situation, and rendering advice to the debtor in determining whether to file a petition in bankruptcy;b. Preparation and filing of any petition, schedules, statement of affairs and plan which may be required;c. Representation of the debtor at the meeting of creditors and confirmation hearing, and any adjourned hearings thereof;d. [Other provisions as needed]						
6. B	y agreement with the debtor(s), the above-disclosed fee does no Representation of the debtors in any discharge any other adversary proceeding.			es, relief from st	ay actions or		
	CERT	TIFICATION					
	certify that the foregoing is a complete statement of any agreem nkruptcy proceeding.	ent or arrangement for pa	syment to me for re	epresentation of the	debtor(s) in		
No	ovember 15, 2019	/s/ Lonnie Grimes					
Date		Lonnie Grimes					
		Signature of Attorney Knollmeyer Law Office P.A.					
		2525 John Harden Drive					
		Jacksonville, AR 72076-1867					
		(501) 985-1760 Fax pennyhawkins2016		1			
		Name of law firm	-ginanicom				

United States Bankruptcy Court Eastern District of Arkansas

		Eastern District of Arkansas					
In re	Terry Don Peery		Case No.				
		Debtor(s)	Chapter	7			
VERIFICATION OF CREDITOR MATRIX							
The abo	ove-named Debtor hereby verifies	that the attached list of creditors is true and co	orrect to the best	of his/her knowledge.			
Date:	November 15, 2019	/s/ Terry Don Peery					
		Terry Don Peery	•				

Signature of Debtor

Equifax 4:19-bk-16123 Doc#: 1 Filed: 14/15/19 16:42:00 of Pages 64 of 64 mbulance CSC Credit Service 4815 W. Markham St. PO Box 126

CSC Credit Service 4815 W. Markham St. PO Box 126
PO Box 105167 Little Rock, AR 72205-3867 Jacksonville, AR 72076
Atlanta, GA 30348

Experian Arkansas Medical Society CLIA Laboratory Program 955 American Lane PO Box 55088 PO Box 530882

Schaumburg, IL 60173 Little Rock, AR 72215 Atlanta, GA 30353-0882

TransUnion ARM Solutions Entergy Arkansas, Inc P.O. Box 2000 PO Box 2929 P.O. Box 61830 Chester, PA 19022 Camarillo, CA 93011-2929 New Orleans, LA 70161-1830

IRS Ascensus Genuine Parts Co.
P.O. Box 7346 200 Dryden Rd Legal Dept.

Philadelphia, PA 19101-7346 Dresher, PA 19025 2999 Wildwood Parkway Atlanta, GA 30339

DF&A Bank of America Humana Military
Legal Counsel Room 2380 PO Box 851001 TRICARE East Region
PO Box 1272 Dallas, TX 75285-1001 PO Box 8923

Little Rock, AR 72203 Madison, WI 53707-8923

AR Dept. of Workforce Svc Brown & Joseph, Ltd InstaMed

Legal Division P.O. Box 59838 1880 John F. Kennedy Blvd PO Box 2981 Schaumburg, IL 60159 12th Floor

Little Rock, AR 72203 Philadelphia, PA 19103

U.S. Attorney, Eastern Dist.

Brown Janitor Supply

PO Box 1229

Brown Janitor Supply

Jackie Peery

9 Newberry Lane

Little Rock, AR 72203 Little Rock, AR 72204 Jacksonville, AR 72076

Accent Cost Containment Cabot Office Machines Jacksonville Chamber/Commerce

PO Box 542007 PO Box 1204 200 Dupree Dr. Omaha, NE 68154-8007 Cabot, AR 72023 Jacksonville, AR 72076

AES Capital Fire Extinguisher Jim Cope, MT P.O. Box 8183 PO Box 6245 PO Box 1212

Harrisburg, PA 17105 North Little Rock, AR 72124 Morrilton, AR 72110

American Proficiency Institute Centerpoint Energy JVL Security
1159 Business Park Drive Attn: Bankruptcy J. Simpson PO Box 94246

Traverse City, MI 49686 P.O. Box 1700 North Little Rock, AR 72190

Houston, TX 77251-9857

4:19-bk-16123 Doc#: 1 Filestijan Entered: 11/15/19 16:43; ഉറും വെട്ടു പ്രാവേശം പ്രവേശം പ്രവേ LabCorp Insurance Service Center P.O. Box 790448 P.O. Box 55126

Boston, MA 02205-5126 PO Box 200043

Saint Louis, MO 63179-0448 Kennesaw, GA 30156-9246

Regions Bankcard WatchGuard Liberty National Ins.

PO Box 2224 2001 3rd Avenue South 1624 Franklin St. Birmingham, AL 35246-3023 Birmingham, AL 35233 Ste 501 Oakland, CA 94612

McKesson Medical Surgical Regions Mortgage Windstream Communications P.O. Box 18001 9954 Mayland Dr. attn: Financial Services Henrico, VA 23233 Hattiesburg, MS 39404 1720 Galleria Blvd Charlotte, NC 28270

Medical Office Systems Slate by Chase WPS/Tricare PO Box 94014 PO Box 3457 PO Box 8967 Palatine, IL 60094 Little Rock, AR 72203 Madison, WI 53708-8967

Medline Industries, Inc SOFI Lending Corp. Letterman Digital Arts center Dept 1080 PO Box 121080 One Letterman Dr. Building A, Suite 4700 Dallas, TX 75312-1080

San Francisco, CA 94129 Orkin Pest Control State Farm Bank

8720 I 30 PO Box 2328 Little Rock, AR 72209 Bloomington, IL 61702

Pettus Office Products State Farm Life Ins Group 2 Freeway Drive Commercial Group Life Little Rock, AR 72204 PO Box 2380 Bloomington, IL 61702-2380

Pioneer Credit Recovery, Inc. Stericvcle 4010 Commercial Ave. P.O. Box 189 Arcade, NY 14009 Northbrook, IL 60062

Prosper Funding, LLC Synchrony Bank 221 Main St. Bankruptcy Dept PO Box 965060 Ste 300 San Francisco, CA 94105 Orlando, FL 32896-5060

U.S. Small Business Admin. Regions P.O. Box 11407 2 North 20th Street Birmingham, AL 35246 Suite 320 Birmingham, AL 35203